Wellness in the Workplace

CCOHS
Canadian Centre for Occupational Health and Safety

Emergency Information

Ambulance

Fire

Police

Poison Control Centre

Doctor

Company Emergency Phone Number

Prepared by

Canadian Centre for Occupational Health and Safety
Hamilton, Ontario, Canada

© CCOHS, 2002, 2004

104-05911/

Wellness in the Workplace

First Edition
(Revised)

Published 2002

P02-1E
ISBN 0-660-18800-7
DSS Catalogue Number CC273-2/02-1E

Canada $10.00 (+ GST)
US/Others $10.00 (USD)
(Prices subject to change without notice)

Ce guide est aussi disponible en français comme
Le mieux être en milieu de travail, première édition
Contactez le Service à la clientèle de CCHST à
1-800-668-4284 ou **serviceclientele@cchst.ca**

Personal Information

This handbook belongs to:

Name _____

Company _____

Position _____

Address _____

_____

Telephone _____

Doctor _____

Telephone _____

Allergies _____

Medical Conditions

_____

_____

In case of emergency please notify:

Name _____

Relation _____

Address _____

_____

Telephone _____

_____

Wellness in the Workplace

Objectives

This is your guide to developing various workplace health, safety and wellness programs. Using the information in this booklet, you will be able to:

- Identify factors that influence the health, safety and wellness of employees.
- Conduct a general health survey.
- Develop a workplace health promotion program.
- Initiate various prevention and promotion strategies.
- Understand the interaction between wellness, safety and employee health.
- Apply a variety of initiatives to help encourage a comprehensive and complete balance between work and health.
- Promote education and training for workplace health.
- Identify relevant contacts for legislation and general health information.

Scope

This guide will assist in the development and implementation of workplace health and wellness programs. It is a practical guide with information designed for both the program leader and the workforce in general. Many of the *tips* and suggestions can be used as handouts for participants in employee training sessions.

Target Audience

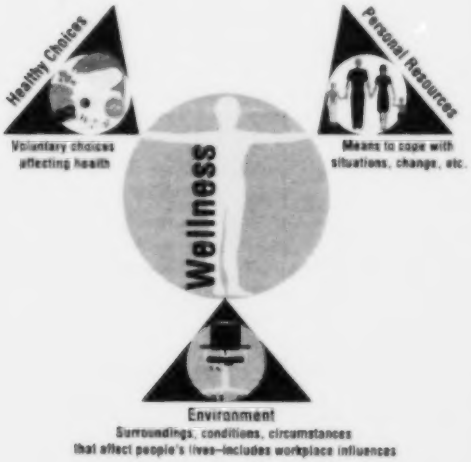
This guide is written for anyone who wants to learn more about workplace health, wellness and occupational health and safety. It is especially useful to individuals involved in the initiation, development and implementation of workplace health and wellness programs.

Summary

Most of us spend a lot of time at work. And, whether we like to admit it or not, work can have a great impact on our health and general well being – for better or for worse.

This book contains resources and information about balancing work and life, safety, ergonomics, healthy eating, active living, conflict resolution and other workplace health promotion and wellness programs.

A comprehensive approach to workplace health and wellness involves programs and policies that address the complete working environment. The influences on the health of employees are wide and varied – as are the options for helping maintain or improve the wellness of individuals or groups.



Adapted from: Health Canada. 2001 "Getting Started and Managing Active Living at Work Strategies"

How Do I Use This Guide?

This guide has been organized to support the development of health promotion and wellness programs and will help you tailor a program for your organization's needs.

Section I – Introduction
Introduces the concepts of health and health promotion. It also describes steps involved in implementing a wellness program in a workplace

Section II – Physical Environment
Introduces common safety concerns, ergonomics, environmental tobacco smoke, and scents in the workplace.

Section III – Organizational Programs
Covers programs such as job design, conflict resolution, harassment, work/life balance, flexible work arrangements, etc.

Section IV - Healthy Choices
Focuses on healthy eating and active living.

Section V – Information Sources
Provides contact information (addresses, phone/fax numbers, web addresses, etc.) for government departments and other related organizations.

Section VI – Appendices
Presents sample survey questions, key resources, and information about how to hire a consultant.

Table of Contents

Section I **Introduction**

1. Wellness and Workplace Health 2
2. Determinants of Health 7
3. Developing a Wellness Program 9
4. Implementing Your Program 13
5. Other Program Strategies and Options 27

Section II **Physical Environment**

1. Safety 38
2. Ergonomics 55
3. Environmental Tobacco Smoke 66
4. Scent-Free Policy 77

Section III **Organizational Programs**

1. Job Design 86
2. Employee Assistance Programs (EAPs) 92
3. Workplace Stress 98
4. Conflict Resolution 110
5. Harassment 118
6. Substance Abuse 122
7. Work / Life Balance 129
8. Flexible Work Arrangements 134
9. Telework / Telecommuting 138

Section IV **Healthy Choices**

1. Healthy Eating 149
2. Active Living 162

Section V **Information Sources**

1. Major Health Organizations in Canada and the United States 172
2. Canadian Government Departments with Responsibility for Occupational Health and Safety 179
3. US Federal Safety and Health Agencies 184

Section VI **Appendices**

A1. Workplace Health & Wellness Survey 197
A2. Selecting a Consultant 208
A3. Abbreviations 210
A4. References 212

Section I

Introduction

1. Wellness and Workplace Health
2. Determinants of Health
3. Developing a Wellness Program
4. Implementing Your Program
5. Other Program Strategies and Options

1. Wellness and Workplace Health

What is meant by wellness and workplace health promotion?

> ***Wellness is simply the process of being aware and actively working toward better health.***
>
> *Wellness Councils of Canada, 2000*

Workplace health promotion is defined as a comprehensive and integrated approach to health which focuses on the general population at a workplace ***and*** the organization as a whole. It addresses a broad range of health issues including physical and psychosocial, environment, health practices, personal resources, etc.

While there are some differences between *Wellness* and *Workplace health promotion*, these terms will be used interchangeably in this guide because both refer to the process of *knowing/learning* and then *doing* something to help achieve better health. They also both encompass the full range of physical, mental and social aspects of health.

Wellness and workplace health promotion is a pro-active approach to healthy living which focuses on the general population at a workplace as a whole, and addresses a broad range of health issues.

As such, workplace health promotion is often a combination of several approaches – each of which are focused on improving the health of an individual or the organization:

- Occupational health and safety (OHS) which focuses on reducing hazards and work-related injuries or illnesses.
- Health Promotion which gives people the tools to improve their own health – these tools usually take the form of information or programs.
- Employee assistance programs (EAP) - EAPs react to employees' personal problems if/when these problems produce a negative impact in the workplace.

- Organization factors such as culture change, job design, work/life balance, relationships at work, etc.

In another way, wellness can be thought of as the end result of the various influences upon a person. These influences take the form of choices made by the individual, the resources the individual has to manage situations, and their overall environment.

What is "health"?

The World Health Organization (WHO) defines health as:

> ***A state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity.***

Thus, *to be healthy* means to be able to cope with and adapt to the changes going on around us; health refers not only to our physical condition, but also to our state of mental and social well-being.

What is "health promotion"?

WHO defines health promotion as "the process of enabling people to increase control over and to improve their health." It is a way of giving people the tools such as information or programs to improve their own health. In other words, health promotion helps people take care of themselves. Health promotion recognizes that many individual, social and environmental factors interact to influence health. It explains how these factors interact in order to plan and act for the greatest health gain.

Why promote health in the workplace?

Unhealthy people and unhealthy workplaces can have many root causes. For some, the danger can be from the processes, chemicals, materials or equipment used at work. For others, a cause of *unhealthiness* is from stress.

A healthy workplace is a definite benefit for both employees and employers. Health Canada (1990) has stated:

> Healthy employees are sick less often and recover from illness faster. They are more efficient, energetic, alert, less prone to accidents and more able to manage stress. Studies in a number of countries, including Canada, point to the same conclusion: that health programs reduce medical costs, sick leave absenteeism, employee turnover and lower job accident rates. … The benefits of having access to health [promotion] at work include better eating habits, lower smoking rates, better working conditions, less conflict between management and staff, and an increased sense of self-worth. Most importantly, healthy people feel more in control of their life, and that kind of attitude has positive benefits on and off the job.

Can there be problems when offering a workplace health program?

Yes. On one hand, employees spend about one third of their time at work. The workplace itself can have an impact on a person's health. On the other hand, the health of the employees is not always the primary goal of a business, nor do some employees think that their life or health should be a concern to their employer. This conflict of interests can create problems.

It is important to have a well designed and thought-out program. Each workplace is unique; hence, each program must be tailored to fit the setting and the needs of the participants.

Why do workplaces invest in wellness programs?

Ideally, an organization invests in a workplace health and wellness program to maintain and enhance the health and well-being of its employees and the organization as a whole. A program may also be implemented in response to one or more of the following trends and observations:

- Employees are frequently sick.
- Injuries and accidents are increasing.
- Work environment is unusually demanding (physically or mentally).
- Stress at work is high.
- Negative changes in employees' attitudes is noticed (increase in tension, lethargy, argumentative, etc.)
- Employee turnover is increasing.
- Health related costs are increasing.
- Productivity, job satisfaction, and/or morale are decreasing.
- Company is experiencing significant changes (downsizing, reorganizing, etc.)
- A large proportion of employees are considered to be at risk for a specific health condition.
- Employees are asking for a wellness program.

A well-planned and comprehensive workplace health and wellness program has many benefits – for both the employer and the employee.

For the employee:

- Increased awareness of how to improve his/her health.
- Make changes or an increased sense of being able to make the changes necessary to *take charge* of personal health.
- No longer *suffer* unnecessary discomfort resulting from injury or illness (e.g., employees ask for help with workstation design if it is a cause of their health condition)
- Improved health and well-being.
- Increased morale and job satisfaction.
- Healthier workplace culture.
- Increased productivity.
- Reduced personal health care expenses.

For the employer:

- Fewer absences due to illness from work or other causes.
- Fewer injuries and accidents.
- Increased morale.
- Increased productivity.
- Enhanced recruiting potential and ability to retain valued employees.
- Improved company image.
- Healthier culture in which to work.
- Contained health care costs.

2. Determinants of Health

What determines health?

The term *determinants of health* is used in health promotion to mean the major factors which influence the well-being of a population. The Population Health Approach project from Health Canada lists the key determinants of health as:

1. Income and Social Status
2. Social Support Networks
3. Education
4. Employment/Working Conditions
5. Social Environments
6. Physical Environments
7. Personal Health Practices and Coping Skills
8. Healthy Child Development
9. Biology and Genetic Endowment
10. Health Services
11. Gender
12. Culture

Other sources may list slightly different determinants or use different terms. For example, others have used terms such as *stress*, *addictions* and *food*.

How does work influence my health status?

Take another look at the determinants of health as listed above. Did you notice how work influences many of these determinants? For starters:

- Income / Social Status
  (e.g., salary and position)
- Social Support Network
  (e.g., friends and co-workers)
- Education
  (e.g., on-the-job training)

- Employment / Working Conditions
  (e.g., safety)
- Social Environments
  (e.g., overall culture at work)
- Health Services
  (e.g., medical or drug plans)

As Health Canada states "paid work provides not only money, but also a sense of identity and purpose, social contacts and opportunities for personal growth." In contrast, people who are unemployed have more stress, illnesses and health problems, hospitalizations and use health services more often than employed persons. People who are underemployed also tend to be less healthy. Studies also show that people who have jobs that are very dangerous or stressful can become *unhealthy* by working.

Studies have also shown that people who have more control over the pace and what tasks they do during their working day are healthier. For example, a study in the United Kingdom found that "workers who had little control within their jobs were over 50 per cent more likely to suffer from heart disease" (Bachmann, 2000). In the most basic of terms, "having control" of your workday means that within the range of things you must do for your job, you can decide which task to do next.

But one doesn't have to be in complete control of their workday to be healthy. Workplace social support (as measured by the number and quality of interactions with co-workers) is also associated with better health. No matter what the setting, a good friendship – the feeling of satisfaction and well-being which evolve from the caring and respect that occurs in a good social relationship – seem to act as a buffer against health problems.

But there are downfalls to working as well. Unsafe working conditions, stressful situations, low level of control, uncertain job security, and social exclusion can all have a negative impact on health.

3. Developing a Wellness Program

How do I get started?

Health and safety legislation and workplace policies and practices can provide the basis for a health promotion program. As with other health and safety initiatives, workplace health and wellness promotion programs should be integrated into overall company policies, as appropriate. Implementation of policies should include training and other support (time to attend sessions, etc.), and choices where possible.

When introducing the wellness/workplace health program, remember to be clear about your:

- Objectives
- Target audience
- Type of Program / Campaign

Objectives

☑ DEVELOP a clear, simple and relevant message.

HAVE both short and long term goals.

KNOW which risk factors and/or workplace characteristics you are targeting.

DIVIDE your program into manageable parts.

KNOW what you want to see happen as a result of your efforts.

Remember to collect data before you begin your program in order to have a baseline data that can be used later to evaluate your intervention(s). Think about how you will know if you have met your objective. Do you want to see:

- An X % reduction in accidents?
- An X % decrease in absenteeism?
- An increased awareness of risk factors for disease or condition X?
- Changes in attitude towards using safety equipment?
- People asking for more information about the topic?

- People attending existing programs by an increase of X %?
- Knowledge of a change in legislation or in a company policy?

You can use current reporting procedures for incidents / accident or attendance records to help monitor and track some of your initiatives.

Target audience

Who is the program for?

- All staff?
- Staff with situation or problem X?
- Staff whom work with material or chemical X?

Focus on a target audience, know their main concerns and issues, and tailor your program to meet their needs.

Type of Program / Campaign

The tone will depend on your target audience and the messages you want to deliver.

CAMPAIGN TYPES

Type	Audience	Type of Message
Rational	Decision makers	Clear, concise, and well-reasoned business case supported by hard facts and figures
Educational	People who understand the importance of the issue but need more information and advice to help or motivate them	Clear, informative, and interesting with suggestions for action or tips to try
Fun	All audiences	Useful option when dealing with a subject that is considered dry, dull or routine (even if the message is important)
Fearful	Very resistant	One of the most popular routes, e.g., "If you don't do this, you may get hurt"

Workplace Wellness Committee

Generally, having a joint labour/management Workplace Wellness committee is recommended. A committee has the advantage of being able to work with key groups at your organization.

It is important to emphasize that a wellness committee should work in close contact with the health and safety committee (and any other committees that may exist at the workplace). The wellness committee may even be a sub-group of the health and safety committee. Either way, the committees will often deal with issues that overlap, making clear communication essential.

The wellness committee will need to establish their own goals and objectives. Be sure to set a clear mandate.

Tips for a Workplace Wellness Committee

Because this committee is voluntary rather than required by law (as is the case with the health and safety committee), the committee can create its own "terms of reference".

General guidelines for an effective committee include:

☑ GET senior management's commitment to ensure action on recommendations.

OUTLINE the role and responsibilities of the committee in general. Is it formed to make recommendations, develop policies, or actually run the programs?

ESTABLISH if joining the committee is on a voluntary basis, or outline how members will be selected.

ENSURE that members represent the range of departments or interests within your organization.

OUTLINE the duties and responsibilities of the co-chairpersons, and of the committee members.

DEFINE a term of service for committee members, if necessary.

ESTABLISH what the minimum ratio of employees to management members will be.

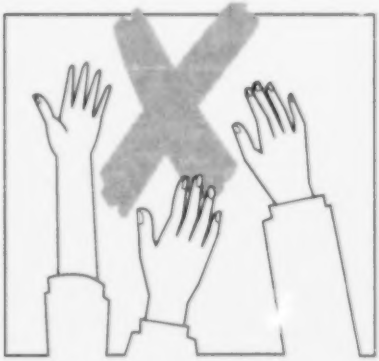
PROVIDE appropriate training or learning opportunities for committee members.

PROVIDE the committee the necessary resources to do their work (time, room, expenses, etc.)

ESTABLISH guidelines for submitting suggestions to the committee and for follow-up procedures in response to suggestions.

ESTABLISH guidelines for reporting committee activities, how the committee will inform the workplace of its decisions, post minutes, etc.

ESTABLISH how decisions will be reached. Consensus is preferred over formal voting (formal voting encourages people to *choose sides*)



4. Implementing Your Program

Step 1: Take Ownership and Leadership and Get support from the "Top"

Find people who are best prepared, willing and interested in helping to promote health at work. It doesn't have to be someone from management but this person or group will eventually need the authority to make some decisions for the program. A joint committee from labour and management as described earlier may be a better option.

While management doesn't have to *lead* the project, they must be consulted at this stage. Discuss *in principal* whether they think a wellness program is worth investigating. At this point you are not presenting an entire program, but rather introducing the concept and discussing possibilities. Keep them informed of new ideas. In some cases, you may need to show research that the program is an investment, not a cost, and how such programs can be linked to reductions in absenteeism (for example). You will need their permission before moving on to Step two.

Any policy will not be successful without support from senior management. Getting support can sometimes be difficult. Managers don't always want to *lose* their employee's time. Management support can also be a double-edged sword when employees feel they *must* participate because their manager said so. However, strong support from the top will make all the difference. Make sure your messages are clear and that any new initiatives are seen for what they are – a way to promote health as part of an overall commitment to maintaining the health and safety of all employees, and the organization.

Step 2: Get Support from Everyone

No individual or committee can or should work in a void. Talk to as many people or groups as you can. Other people who can help, if they are not involved already, include:

- Union / worker representatives
- Management
- Health and safety professional(s)
- Human resources professional(s)
- Your employee assistance program (EAP) provider,
- Medical or occupational health staff, and
- Local groups from your community who may be able to help include:
  - Public Health,
  - Mental Health professional,
  - Canadian Cancer Society,
  - Heart and Stroke Foundation of Canada,
  - A member of your local Dietitians of Canada
  - Etc.

How to Show Management Commitment?

- Acknowledge workplace health and wellness in the vision or mission statement of the organization.
- Have a written policy on workplace health and wellness.
- Ensure leadership, responsibility and accountability are shared by the entire organization.
- Include workplace health and wellness in the overall strategic planning including allocation of resources for the program.

Adapted from: National Quality Institute (1998) Canadian Healthy Workplace Criteria

Step 3: Acknowledge Current or Informal Activities and Collect Baseline Data

In many companies, a group of people may go to a weight management class together, or others may walk at lunch. These groups are already forming one of the bases for your workplace health and wellness program. Acknowledge these informal activities and encourage new ones. You could arrange for the weight management leader to come to the office instead. Or, post a map of the area with scenic (and safe) walking routes on it.

Baseline information

Baseline information must be collected before the program starts. Sources of baseline data include:

- Attendance records
- Accident / Injury / Incident / First aid reports
- Health care claims or health screening results
- Facility inspection records
- Survey / Questionnaire results

Suggestions

What to Measure?

Suggestions include:

- Absenteeism
- Employee turnover
- Accident rates
- Implementation of employee suggestions or ideas
- Participation in wellness programs
- Adherence to wellness program
- Awareness of healthy lifestyle issues
- Changes towards more healthy habits

continued...

- Satisfaction in working conditions – can cover many areas such as:
  - Occupational health and safety
  - Leadership style
  - Communication across the organization
  - Control over work
  - Recognition for achievements
- Return to work rate from injuries or illnesses

Step 4: Identify the key needs and expectations of the workplace.

Ask people what they want. You need to find out what are the employees'

- needs,
- attitudes, and
- preferences

regarding specific aspects of the physical and psychosocial environment, health practices, and personal resources. Be sure your survey is comprehensive.

Conduct a survey (open or anonymous) or interview on a one-to-one basis. Or, ask members of one department what they feel is needed. Compare results to see if opinions vary from one department to the other.

Most importantly, listen to the results of the survey. You may think an active living program (and having company during your lunch time jog) is a good idea, but if staff would rather have their workstations ergonomically assessed and designed.... hate to say it, but you'll likely be jogging alone.

Survey Method Suggestions

Suggestions

- Suggestion Box
- Host a Round Table
- Mini Survey (just a few questions)
- Full Survey (longer and more in-depth questions)
- Interviews

Sample Survey Questions are located in Appendix A1.

Reminder

Surveys can provide more confidentiality than an interview but it may not be the best way to reach all employees. Consider the literacy level of your employees and then decide which communication method is best for your audience.

Assessing the Results

For surveys, statistical computer programs can be used, or tally responses *by hand*. Depending on the nature of the question and the intent of the survey, some questions may be given more weight than others. For interviews, have the interviewers rate the answers from each respondent immediately following the session.

Step 5: Develop a Detailed Plan

Based on steps one to four:

- Identify what needs to be done.
- Prioritize these needs.
- Set realistic targets and timelines. Have both immediate and long-term goals.
- Plan how and when the program will be initiated.
- Plan how to maintain interest.

- Know what resources you need for each step (time, money, people, etc)

You may want to start on a small scale or have a pilot project first.

Reminder

While it is important to have a clear plan, don't get overwhelmed. Many of the more effective programs are also the *short* and *simple* ones.

Aims

State goals clearly. Know ahead of time what you want to get out of the program for the short and long term. For example, do you need measurable targets like absenteeism or sick days to decrease? Do you need to see a change in attitudes or behaviours, or is giving people the choice to participate in the program enough?

Examples include:

- Target a specific injury or illness.
- Raise awareness of policies that protect staff health.
- Develop the knowledge, skills, and attitudes needed to make positive health choices.

(See *Wellness Program Organization* table)

Organizing and Delivering Your Program

Organize your activities into three general categories:

- Education / Awareness – providing knowledge
- Skill building – getting individuals actively involved in changing their behaviour
- Work Environments – changes in the workplace to support the initiative

Vary the delivery of your program by focusing on different elements at different times depending on the needs of your organization. In some cases, there will be an overlap between the types of information delivered.
(See *Wellness Program Organization* table)

WELLNESS PROGRAM ORGANIZATION

Topic	Education / Awareness	Skill Building	Work Environment
Safety (e.g., introduction of new chemical)	Post safety procedures or new policy Provide print information about hazards.	Educate or train employees on how to work safely with the new chemical Train the employee on the use of safety or personal protective equipment Provide hands-on demonstrations	Engineer the workplace such that hazards are reduced as much as possible (e.g., provide proper ventilation and storage). Provide necessary personal protective equipment (PPE)
Stress	Post information about how to deal with stress Offer seminars on effective communication	Give employees opportunities to discuss the flow of work Offer opportunities for training of new skills.	Provide clear job descriptions Encourage employee participation in decisions affecting their job Provide regular feedback or performance reviews Provide access to an Employee Assistance Program (EAP) provider

Adapted from Health Canada. 1999. *Health Works: A how-to for health and business success*

WELLNESS PROGRAM DELIVERY

ACTIVITY	JANUARY	MARCH	JUNE	SEPTEMBER	NOVEMBER
Type	**Personal Health**	**Family Health**	**Family Health/Safety**	**Personal Health**	**Safety/Family Health**
Topic	Personal Stress Management	Nutrition	Sunlight and Your Skin	Maintaining Fitness During Winter	Annual WHMIS Training Course
Education	Stress	Organize "Lunch-n-Learn" sessions to coincide with Nutrition Month	Practical tips and suggestions for sun protection during summer activities		Discuss the symbols found at work (WHMIS) *and* at home (consumer labels)
Skill Building	Blood Pressure Screening Clinic: Train those interested how to use the self check machine.	Have a "How to Cook Light" demonstration		Provide training on equipment in company facility	WHMIS related activities: Quizzes that reinforce the symbols and their meanings

ACTIVITY	JANUARY	MARCH	JUNE	SEPTEMBER	NOVEMBER
Type	**Personal Health**	**Family Health**	**Family Health/Safety**	**Personal Health**	**Safety/Family Health**
Work Environment	Annual survey of employees to determine current concerns	Highlight new cafeteria menu changes	Provide appropriate personal protective equipment (PPE) for outdoor workers	Introduction of financial cash back program for fitness membership	Check containers at work for proper labelling and storage. Encourage employees to do the same at home

Step 6: Put Your Plan into Action

Now that you have:

- written your ideas as programs, policies and activities,
- set realistic targets with realistic timelines, and
- reconfirmed management support and received final approval.

  – ***it's finally time to start!***

Communicate your program to everyone. Remember to vary how the program is promoted – some people will see posters on the bulletin boards, others will not.

Formally introducing corporate policies that state the importance of the workplace health programs are an additional essential step.

Sample Mission Statements

You may wish to adopt or modify the following mission statement for your workplace:

Sample

WELLNESS POLICY MISSION STATEMENT

"To create a workplace environment which encourages all employees to incorporate health and wellness goals into their daily routines."

ABC Company Management

Sample

WORKPLACE HEALTH AND WELLNESS POLICY

ABC COMPANY

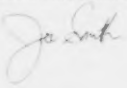
January 1, 2002

To All Employees:

It is the policy of ABC Company to provide a complete healthy working environment to all employees.

ABC Company promotes workplace health and wellness initiatives by providing the resources and support necessary to develop and implement these programs. Employees and management are encouraged to work together in supporting workplace health and wellness initiatives.

Joe Smith, President



ABC Company

Step 7: Monitor, Evaluate and Maintain the Program

Build into your program ways to monitor its acceptance, progress and results – the measurable objectives set in Step 5 help here. Keep everyone informed of both successes and 'road bumps'. Praise what should be praised – big or small; encourage where there is room for improvement. Keep in mind that your program has both long- and short-term goals.

Measuring Outcomes?

Look for trends or data that show:

- the goals established prior to the program have been met, or exceeded
- participation and behaviour changes have occurred as a result of the program
- employee morale and/or job satisfaction have increased

Review and Evaluate Your Program

A review of the program can help you know what is working and what is not. Gathering the right information is essential but it does not have to be complicated. You may:

- Track participation rates.
- Monitor absenteeism, accident rates, injury or illness rates, compensation statistics, health care claims, and other indicators.
- Test for increased knowledge and skills following promotion or training programs. A pre- and post-program questionnaire is a simple evaluation tool for these situations.

- Participant satisfaction is essential. Ask people if they liked the program. If they liked it, they will likely continue to participate, or participate again in another program.
- Inspect for changes in the workplace. Are safety rules being followed? Is the workstation designed appropriately for the employee using it?

When reviewing the outcomes, remember to evaluate the program based on the aims and objectives you set in the beginning. Ask the following questions:

- What was the focus of the program?
  - To increase knowledge and understanding of factors which affect health in general or do you want to target a specific injury or illness?
  - To raise awareness of policies to protect staff health?
  - To provide support to staff to improve their general health?
  - To develop the knowledge, skills, and attitudes needed to make positive health choices?
- Who was the program for?
  - All staff?
  - Staff with situation or problem X?
  - Staff who work with material or chemical X?
- What outcomes were expected?
  - What were the short-term objectives?
  - What were the long-term objectives?
  - What baseline data did you collect? How does current data compare?

Maintain the Program

Use the results of your review and evaluation to help gauge what is working and what could be enhanced.

Internal and external cues can help you decide what topic to offer next. For example:

External:

- Changes in health and safety legislation can be a good time to promote the changes and to refresh existing rights or duties.
- An accident in a similar type industry may prompt interest in your facility. Use the *newness* of the situation to review safety at your workplace.
- A television news program or newspaper is running a feature on stress in the workplace. Enhance that information with details specific to your workplace.

Internal:

- Monitor trends in your workplace. Are most of the employees new hires? Are a majority of your workforce near retirement? Different groups will have different needs so be sure to tailor your programs.
- Has the workplace undergone a re-organization? Many people will have new tasks to perform. Review these jobs for any new training requirements in terms of ergonomics, safety, job design, working relationships, etc.

5. Other Program Strategies and Options

Promotion, Promotion, Promotion!

Depending on your audience, vary how the program is announced or delivered. Options include:

- Posters
- E-mail / Mail
- Seminars
- Visits (promotion sessions, on-site inspections, etc.)
- Information Fairs (exhibits, pamphlets, etc., from various groups within or outside the company)
- Training
- Interviews / counselling
- Surveys
- Videos (watch at a set time, or available to watch at their 'leisure')
- Internet / Intranet
- Brochures / Flyers

Promoting to Various Stakeholders

When promoting your program or when you are gathering support, be aware that different stakeholders will be interested for different reasons. Remember to highlight what benefits are most important to that particular group.

Generally speaking, the following groups are interested in the effectiveness of the program because:

Senior Management

- Reduced absenteeism, medical costs, etc.
- Increased productivity
- Improved company image
- Improved morale and job satisfaction.

Line Supervisors

- Senior Management endorsement
- Impact and benefits to their responsibilities
- That time needed by employees to participate is compensated by increased productivity.

Employees

- Reduced risk of developing heart disease, high blood pressure, or other medical conditions (depending on the type of program)
- Increased ability to fight infections.
- Reduced symptoms of anxiety, stress, and depression
- Benefits to working day (be able to meet daily targets easier)
- Better work/life balance as well as benefits to leisure activities.

Event Planning

Be flexible. If something happens in the workplace, or nationally, that makes part of your future plans more topical and relevant to deliver now, then do so.

You can also plan the launch of your campaign to coincide with national efforts by major organizations.

The following charts show examples of national campaigns.

CANADIAN NATIONAL CAMPAIGNS

Month	Event	National Sponsor
January	National Non-Smoking Week	Various regional/ provincial health agencies
	March of Dimes Month	Easter Seals/March of Dimes
February	Heart Month	Heart and Stroke Foundation of Canada
	White Cane Week	Canadian National Institute for the Blind
	International RSI Awareness Day (28th)	Various Trade Unions
March	Nutrition Month	Dietitians of Canada
	National Kidney Month	Kidney Foundation of Canada
	National Fight Liver Disease Month	Canadian Liver Foundation
	Red Cross Month	Canadian Red Cross Society
April	Cancer Awareness Month	Canadian Cancer Society
	National Volunteer Week	Volunteer Canada
	Dental Health Month	Canadian Dental Association
	Earth Day (22nd)	Earth Day Canada
	Day of Mourning for injured or deceased workers (28th)	Various Trade Unions
May	National Sun Awareness Week	Canadian Cancer Society
	North American Occupational Safety and Health (NAOSH) Week	Co-ordinated by the Canadian Society of Safety Engineers
	Multiple Sclerosis Carnation Campaign	Multiple Sclerosis Society

Month	Event	National Sponsor
September	Prostate Cancer Awareness Week	Canadian Cancer Society
	Arthritis Month	Arthritis Society of Canada
October	Breast Cancer Awareness Month	Canadian Cancer Society
November	Diabetes Month	Canadian Diabetes Society
	Osteoporosis Month	Osteoporosis Society of Canada
December	Christmas Seal Campaign	Canadian Lung Association
	National Safe Driving Week	Canada Safety Council
	World AIDS Day (1st)	Canadian AIDS Society

Other Canadian events are located on the Health Canada "Calendar of Health-Related Days" web page at the following address: http://www.hc-sc.gc.ca/english/calendar.html

Other American events are listed on Health Finder "National Observances Calendar" located on the Internet at: http://www.healthfinder.gov/library/nho/nho.htm

Reminder

Overlapping with large media campaigns can be helpful, but it is important that your program is not seen as "topic of the month". Keep consistent messages, have on-going support for all programs, and always show your commitment to the long-term goals.

AMERICAN NATIONAL CAMPAIGNS

Month	Event	National Sponsor
January	Birth Defects Prevention Month	March of Dimes
February	American Heart Month	American Heart Association
March	Nutrition Month	American Dietetic Association
	National Kidney Month	National Kidney Foundation
	Red Cross Month	American Red Cross
April	Cancer Control Month	American Cancer Society
May	Melanoma/Skin Cancer Detection and Prevention Month	American Academy of Dermatology
	North American Occupational Safety and Health (NAOSH) Week	American Society of Safety Engineers
	Stroke Awareness Month	American Heart Assoc. and National Stroke Assoc.
September	Cholesterol Education Month	National Heart, Lung and Blood Institute
October	Breast Cancer Awareness Month	American Cancer Society
	Liver Awareness Month	American Liver Foundation
	Healthy Lung Month	American Lung Association
	National White Cane Safety Day (15th)	American Council of the Blind
November	Diabetes Month	American Diabetes Association
	Great American Smoke Out	American Cancer Society
December	World AIDS Day (1st)	American Association for World Health

Need a slogan?

Try one of these:

- Putting the health in health and safety
- Success is no accident
- Good health is good business
- Health is everyone's business.

Or, have a slogan competition and get everyone involved.

Activity Suggestions

Mixing the types of activities undertaken during a session and throughout the program will help maintain interest and participation. Activities may include:

- Demonstrations
- Presentations
- "Ask the Expert" (open questions and answers)
- Group discussions
- Brainstorming
- Role playing

Increasing Participation

Everyone will have a different reason for participating in a workplace health and wellness program. For a voluntary program, it would be unrealistic to expect 100% participation. However, there are some steps to take to help encourage employees to participate.

1. Survey and re-survey. Be sure you are offering programs that people think are important and want to attend.
2. Use "role models". Highlight the successes of employees in company newsletters or on bulletin boards (with their permission).
3. Integrate your program with other programs.
4. Provide the right support. Have a co-ordinator or main contact person who can provide additional information to those who want it.

5. Eliminate barriers. If appropriate, ask those who do not participate "why not?"

6. Be flexible. You may want to capitalize on "teachable" moments. Turn a negative event into a positive by emphasising prevention and awareness.

7. Follow-up with people who have stopped participating. Also follow-up participants to ensure their needs are being addressed.

8. Offer a variety of options or programs. Programs can become *stale*. Workforce changes may require you to re-visit the basics. Look for ways to expand or modify existing programs. Ask for input from various groups.

9. Use appropriate incentives (see below for more information about incentives).

Remember...

Success can be measured in many different ways. People who have walked their first kilometre have accomplished as much as a runner who has finished his/her first half-marathon.

Overcoming Barriers to Participation

PARTICIPATION BARRIERS

Obstacle	Solution
Time	Offer short programs or break longer ones into several sessions. Have programs or tools (videos, etc.) that individuals can use on their own time. Offer time management courses. Emphasis the benefits of doing "even a little bit."
Not convenient or accessible	Offer programs at various times or locations. Offer different versions of a program – you may want to develop a "take home" version (e.g., an information kit with ways of tracking participant success without the help of a program co-ordinator.) Co-ordinate programs to compliment various work schedules (very important if the business has shift workers). Offer programs in physically accessible locations. If you need to charge for programs, offer programs at the most reasonable cost possible.
Lack of support	Ensure that management demonstrates its support by providing time or other resources. Use teams or buddies for peer support. Have programs that can be used at home as well. Invite family members to attend events whenever possible.
Confidentiality	Use your medical staff (if you have them), human resources, or an outside organization to analyse and/or manage any medical information. Ensure you have a confidentiality process in place and that participants are aware of it.

Use of Incentives

Incentives can be both extrinsic (rewards received from someone else) and intrinsic (rewards that come from oneself). Common incentives include:

Extrinsic

- Financial rewards (cash, fitness facility memberships, etc.)
- Discounts, rebates
- Paid days off, or time off work to attend wellness or training seminars.
- Material Goods such as T-shirts, mugs, gym bags, water bottles, cook books, music CDs, etc.
- Prizes donated by local businesses (restaurants, travel agents, florists, etc.)
- Competitions
- Recognition (from co-workers, in company newsletter, bulletin board, nomination for honour roll, etc.)
- Offer to donate money to a charity of the employee's choice.

Intrinsic

- Feeling of personal accomplishment and achievement
- Build self-confidence and self-esteem
- Awareness of factors that influence health
- Motivation to adopt positive behaviours

The challenge is to find the right combination and types of incentives – using too many of one type (such as a water bottle for every accomplishment) will dilute the value of having a reward.

☑ ASK and LISTEN to what participants would like to receive.

USE a mix of extrinsic and intrinsic rewards.

MAKE SURE incentives are rewarded in a fair manner. If they are linked to a contest, be sure the rules are fair and easily understood.

MAKE SURE the prizes are appropriate. For example, if you give away a restaurant coupon for meeting weight loss goals, check to make sure the restaurant provides healthy choices on their menu.

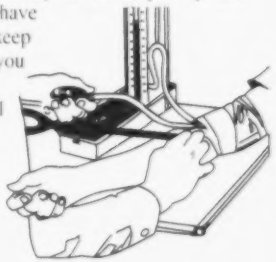
TRY TO 'BUILD UP' to a big incentive instead of giving away the best incentive first.

DO NOT UNDERESTIMATE the value of intrinsic incentives. Most people like to have recognition for their hard work. Others will enjoy talking about their achievements to a group. Give people the chance to tell their story if they want to.

DO NOT USE negative incentives. Emphasize that a person has walked a certain distance, not that they have to do more.

Collection of Voluntary Medical Information

Some organizations may be able to offer medical screening for participants. These programs include pre-fitness check-ups, cholesterol tests, blood pressure checks, etc. If medical information is collected, it must be collected for its stated purpose only and not released for any reason without express permission from the employee. If your facility has an occupational or employee health department, they may already keep confidential medical information. If not, human resources departments also have confidential files for each employee and medical information may be kept as part of this file (if acceptable to the participants). Other organizations may have a third party collect and keep this information. Before you start, contact a lawyer who specialises in medical confidentiality to identify if there are any legal obligations or restrictions.



Blood pressure check

Section II

Physical Environment

1. Safety
2. Ergonomics
3. Environmental Tobacco Smoke
4. Scent-free Policy

1. Safety

Health and safety is not traditionally considered to be a part of a wellness program. However, the purpose of a workplace wellness program is to offer a comprehensive health service for employees. Therefore, it is important to remember that employees are potentially exposed to a wide variety of health hazards or situations at work on a regular basis. As such, it is impossible to deal with *wellness* in isolation from *health and safety* and vice versa.

This chapter highlights common health and safety issues. It does not cover all aspects of running a health and safety program. We encourage health promotion and health & safety professionals to work together to improve or resolve safety concerns.

In addition, in most jurisdictions, health and safety issues will fall within the mandate of the health and safety department and the health and safety committee. It must be emphasized that unlike wellness initiatives, there are specific occupational health and safety laws and regulations that must be complied with.

The Inquiries Service of the Canadian Centre for Occupational Health and Safety (CCOHS) can help find information about most workplace hazards and control measures. If you want information about regulations or laws, contact your local government (Section V).

This section will provide a brief overview of situations that can cause injury or illness. The goal of this section is to help you:

- Be aware of potential hazards in the workplace,
- Understand the possible causes of health conditions reported by employees, and
- Use the principles of anticipation, recognition, evaluation and control to examine situations.

Types of Hazards

What is a Hazard?

Certain workplace conditions and work practices have the potential to cause accidents, injuries, or risk of illness. Hazard recognition involves identifying these situations for the purpose of taking action to prevent accidents, injuries and illnesses.

A hazard can be defined as the potential in an activity or process which could result in:

- injury or ill health to persons,
- damage to equipment, structure or property, or
- degradation of the function of the process.

Safety is:

a) Freedom from the risk of accident, injury and illness

b) Performing a task in an accident-free manner.

The process of hazard recognition involves seeking answers to the following questions:

- Where do accidents, illnesses, and injuries occur?
- How do accidents, illnesses, and injuries occur?
- Why do accidents, illnesses, and injuries occur?

Examples of Workplace Hazards

Certain types of jobs are known to be high risk jobs. Examples of such jobs are:

- working with electricity
- working at heights
- handling materials (especially repetitive movements and lifting)
- working near hoisting apparatus and conveyors

- using ropes, chains and slings
- operating powered industrial trucks
- working close to points-of-operation (e.g., rotating blades)
- working with exhausts and ventilation systems
- woodworking operating machine tools
- welding and cutting
- operating hand-held and portable power tools
- working with chemical(s)
- working in a high noise area
- handling flammable and combustible liquids
- working with boilers and pressure vessels

An inspection of your workplace may uncover a wide range of hazards.

EXAMPLES OF WORKPLACE HAZARDS

Sub-standard Work Conditions	Sub-standard Work Practices
Slippery floors	Not using personal protective equipment
Missing machine guards	Bypassing safety interlocks
Poor workstation design	Running on stairways
Overfilled containers	Ignoring lock-out procedures
Chemical spills	Inadequate job design
Cluttered hallways	Awkward postures
Poor housekeeping	
Poor lighting	

Some exposures may not be noticed in a walk-through inspection. However, such exposures may cause illness.

EXAMPLES OF HIDDEN EXPOSURES	
Biological Hazards	Mould, fungi, viruses, bacteria, infectious diseases
Toxic Chemicals	Inhalation of dusts, fumes, mists, vapours, and gases; contact with toxic liquids and solids
Physical Agents	Noise, heat, radiation
Poor Indoor Air Quality	Inadequate ventilation, temperature and humidity; toxic air contaminants, moulds, fungi
Ergonomics	Repetitive motions; poor workstation design; awkward, fixed, or constrained body positions; forceful motions concentrated on small body parts such as hands or wrists

Methods of Identifying Hazards

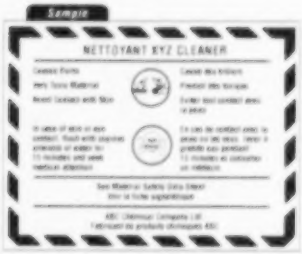
METHODS OF IDENTIFYING HAZARDS	
Method	**Example**
Anticipation	Inventory of hazardous chemicals, processes
Recognition	Smokes, fumes, vapours, dusts, mists, odours, noise, heat
Evaluation	Exposure measurements
Health Condition(s)	Injury and illness among exposed employees

Anticipation

Anticipation is the term used for expecting or knowing about any potential hazards that may be present in the workplace. A large amount of information is available through literature about the use of various machinery, equipment, industrial processes, and chemicals. This knowledge can be used to develop work practices that prevent harmful exposures.

For example, if toxic chemicals are used in your workplace, prevention measures include:

- compiling an inventory of toxic materials received, handled, produced and disposed,
- making sure that containers have the proper labels,
- maintaining Material Safety Data Sheets (MSDSs) for all products received, handled, produced and disposed,
- implementing safe work practices as recommended in the MSDS,
- ensuring that employees understand emergency procedures,
- providing emergency contact telephone numbers to all employees,
- ensuring employees are trained in the safe use of chemicals, and
- maintaining employee training and employee competency check records



WHMIS label

Recognition

Recognition refers to the ability to *see and wonder* if what is present may be a potential hazard. The presence of dusts, smoke, vapours, mists, unpleasant odours, excessive noise, very hot or cold conditions, etc. indicate the possibility of harmful exposures. In order to be sure, a qualified professional must evaluate these conditions.

Appendix A2 gives some helpful tips for selecting a consultant.

Evaluation

Evaluation refers to the ability to assess the situation or hazard, and to make conclusions about the level of risk to the employee(s). The evaluation of workplace exposure requires specialized technical expertise. The important concern is to make sure that such measurements:

- are done by a qualified and experienced person,
- are in compliance with the applicable regulations and standards,
- provide results that help evaluate employee exposure and risk of health effects, and
- recommend practical methods of controlling exposures immediately as well as long-term solutions.

Health Conditions

Recognizing workplace hazards from existing health conditions is NOT a preferred method of evaluation because:

- Health effects may appear many years after the exposure.
- By the time health effects are noticeable, the damage has already occurred.
- All exposed people are not affected equally. In the beginning, only some highly susceptible people report health effects. As exposure continues, more and more people will report health concerns.

- Some types of illnesses can be detected only by medical diagnostic procedures; affected persons do not experience any symptoms until it is too late for effective medical care.

The following section summarizes health effects of some common occupational exposures.

TYPES OF HEALTH EFFECTS

Acute Health Effects	Acute health effects are those that occur during the exposure or within hours after exposure. The probability of such effects is typically low at small exposure levels, but will likely occur above a certain level (threshold level). The severity of such effects increases with exposure level.
Chronic Health Effects	These are illnesses that occur as a result of low-level exposure over many years. Occupational cancers are one of the most serious chronic effects which can occur several years after the original exposure. The period between the exposure and development of disease is known as the latency period. The probability of cancer occurring increases with the level of exposure; however, the severity of the cancer is not affected by the dose.
Teratogenic Effects (Effects on the developing fetus)	Certain exposures may not affect the exposed persons, but can cause developmental abnormalities in the fetus (unborn baby). Known teratogens include certain drugs, infections, alcohol and ionizing radiation.
Genetic Effects	Malformations, abnormalities and diseases can occur in descendants of exposed parents. Ionized radiation is known to cause genetic disorders.

Examples of Potential Hazards

Causes of these health effects may be grouped into categories such as biological, chemical, physical, and/or from indoor air or ergonomics factors. A brief summary of these hazards is below (ergonomic factors are discussed in the next chapter of this guide).

Health Effects Due to Biological Agents

HEALTH EFFECTS OF BIOLOGICAL AGENTS

Disease	Occupation	Exposure at Risk
Tuberculosis	Health care providers, group home workers	Inhalation of airborne infection
Farmer's Lung	Agriculture and related jobs	Inhalation of airborne infection, grain dust, fungus
Q fever	Meat and livestock handlers, slaughter house workers	Airborne or direct contact with carcasses and droppings of infected cattle
Upper Respiratory Tract Infection	Farming, grain handling	Vegetable fibres, cotton, hemp, flax, grain dust
AIDS	Health care providers	Direct contact with infected blood and body fluids
Hepatitis B	Health care providers	Contact with infected blood and biological materials

Health Effects Due to Toxic Chemicals

Since chemicals can have very different properties and effects, the following is a brief summary of general situations. Often this information is discussed in WHMIS (Workplace Hazardous Materials Information System) or hazardous materials training.

METHODS OF ENTRY	
Inhalation	Inhalation is the main route of entry for hazardous chemicals. Airborne dusts, vapours, gases, and mists can be directly inhaled into lungs. Insoluble inhaled materials are deposited into the lungs for long durations of time and can cause lung disease. Soluble inhaled materials can be absorbed and passed into the blood-stream, and the brain.
Ingestion	People can unknowingly eat or drink toxic chemicals such as lead oxide through contaminated foods, drinks and tobacco. These toxic chemicals are absorbed from the digestive system into the blood and then reach the whole body.
Skin	Some chemicals can be absorbed through the skin in quantites that can cause harmful effects. Such compounds include solvents, organic lead compounds, organic phosphate pesticides, phenols, cyanides, toluene, xylene and aromatic amines.

Sites of Action

The toxic action and resulting diseases can occur in the tissues where the toxic chemical is deposited or absorbed.

SITES OF ACTION

Site of Action	Potential Organ or System Affected
Route of Entry	Lungs, skin, digestive system
Circulation in the Body	Blood
Sites of Accumulation	Thyroid, bone, central nervous system
Route of Excretion	Liver, kidney, bladder

Various effects may also be seen. For example, skin contact with different agents has different effects:

SKIN CONTACT

Skin Contact with:	Adverse Effect(s)
Acids, Alkalis Irritant Gases Organic Solvents Degreasing Agents	Irritant Dermatitis Skin irritation
Metals Epoxy Resins Formaldehyde	Sensitization Dermatitis Allergic reaction

Health Effects from Physical Agents

The following table summarizes the source of exposure and health effects of selected physical hazards.

SOURCES AND HEALTH EFFECTS OF PHYSICAL HAZARDS

Types	Examples of Source	Health Effects
Noise	Noisy Machines	Hearing Loss, Stress, Annoyance
Hand-arm Vibration	Operation of vibrating hand held tools	White finger, Hand-Arm Vibration Syndrome (HAVS)
Whole-Body Vibration	Working on a vibrating platform, driving farm tractors and other heavy vehicles specially on rough terrain	Back disorders, A wide range of health conditions
Hot Environments	Working near furnaces, Summer outdoor work	Heat stroke, Heat Syncope (fainting)
Cold Environment	Working outdoors in cold weather, working in cold storage	Hypothermia, Frostbite, Trenchfoot
Hyperbaric (High Pressure) Environments	Diving	Bends/decompression sickness, joint pain, breathing and ear disorders
Hypobaric (Low Pressure) Environments	High altitude workers	Disorders of the lungs, Mountain sickness (headache, nausea, vomiting)

Types	Examples of Source	Health Effects
Ionizing Radiation	Working near x-ray machines, handling radioactive materials, uranium mining, working in nuclear energy power plants, working in nuclear research laboratories	Radiation sickness within hours or days after exposure to very high radiation levels. Cancer after several years of low-level exposure
Non-Ionizing Radiation		
Ultraviolet	Sun light, arc welding, black light lamps, germicidal lamps	Skin cancer, eye damage
Light, Lasers	Lasers, welding, light	Retinal (eye) damage
Microwave and Radio-frequency	Microwave Ovens, Radio and TV Transmission, Radar Antenna	Heating of the body, central nervous system (CNS) effects
Power Frequency Electro-magnetic Field (ELF)	Working near electric power transmission, distribution lines, or power transformers	Unconfirmed indications of Leukemia, brain tumors

Health Effects from Poor Indoor Air Quality

Health and comfort effects believed to arise from poor indoor air quality are collectively known as Sick Building Syndrome. The symptoms generally include headache, fatigue, dry throat, shortness of breath, skin irritation, dizziness, itchy eyes, bleeding nose and general malaise or non-specific illness. Causes of these health effects are varied, but can include:

- air contaminants entering the building
- biological agents such as mould, fungi and substances from plants,
- emissions from furniture, carpets, carpet glues, paints and varnishes,
- tobacco smoke, carbon dioxide, body odours, perfumes,
- toxic gases, vapour fumes, etc., from laboratories, photocopiers and other processes and activities taking place inside the building, and
- indoor environment factors such as temperature, humidity, noise, lighting and air movement.

Health Effects from Inadequate Ergonomic Conditions

Please see the next chapter in this guide.

Methods of Hazard Recognition

Hazard Mapping

Risk mapping or hazard mapping is an excellent way to identify hazards and the level of urgency for controlling these hazards.

Ask all employees from a work area to get together and mark hazard locations on the area's floor plan. After, they should discuss the importance of controlling each hazard and develop a consensus on which ones should be dealt with first. Strong points of this method are that it:

- Draws on advantages of employee knowledge and experience
- Allows for those who work near the hazards to have input in the decision making process.
- Encourages employee involvement
- Is effective in many types of workplaces

Job Safety Analysis (JSA)

Job safety analysis (JSA), also known as job hazard analysis, is the first step in developing correct work procedures. Job safety analysis involves the following steps:

1. Select a job.
2. Break the job down into a sequence of steps.
3. Identify the hazards of each step.
4. Define preventive measures.

As a first priority, the analysis should be conducted on all critical tasks or jobs:

- those where frequent accidents and injuries occur
- those where severe accidents and injuries occur
- those with a potential for severe injuries
- new or modified jobs
- infrequently performed jobs, such as maintenance

Job safety analysis is conducted by observing an employee doing the job (often observed by a trained professional accompanied by a health and safety committee member). The reason for this exercise must be clearly explained to the employee – emphasizing that the job, not the individual, is being studied. Another approach, useful in the analysis of infrequently performed or new jobs, is group discussion.

When a job consists of more than one specific task, each task should be analyzed separately in the job safety analysis. The final version should be presented in a

narrative format as a step-by-step procedure to do each task. Reference may be made to applicable rules and regulations and to the personal protective equipment required, if any. Employees who carry out the tasks should be consulted in developing the procedure.

Hazard Reporting

Health and safety legislation requires employees to report hazards to their supervisor. This reporting prompts corrective action without waiting for the next round of planned workplace inspections.

Hazards can be reported either verbally, or on a simple form. Hazard report forms should be readily available to all employees.

The sample forms on the following two pages can be used for Job Safety Analysis and Hazard Reporting.

Sample

JOB SAFETY ANALYSIS (JSA) WORKSHEET

Industry: Construction

Operation: Road repair **Job:** Pavement repair

Task	Who does it	Hazards	How to prevent injury/accident
Operating a jack-hammer	Joe Doe	- noise - vibration	- ear protectors - vibration-absorbing gloves

Applicable Legislation: OH&S Act and Regulations (refer to the act and regulations in your jurisdiction)

Date: _____

Developed by: _____

Sample

HAZARD REPORTING FORM

Name:
Location:
Equipment:
Date:

Description of Hazard:

Suggested Corrective Action:

Signature:

Supervisor's Remarks:

Corrective Action Taken:

Signature of Supervisor:
Date:

Notes

2. Ergonomics

What is ergonomics?

The word ERGONOMICS is made up of two Greek words: "ERGOS" (WORK) + "NOMOS" (NATURAL LAWS).

In simple terms, we can define ergonomics as the science of matching the work (job) to the worker.

Injuries resulting from poor ergonomic conditions are collectively known as work-related musculoskeletal disorders (WMSDs). WMSDs are painful and often disabling injuries caused primarily by prolonged work involving repetitive movements, forceful movements and awkward body postures. Since most work requires the use of arms and hands, WMSDs are often associated with the wrists, shoulders, neck, muscles and joints; however, the back, legs, hips, ankles and feet can also be affected.

Work-Related Musculoskeletal Disorders (WMSDs) are also called:

- Repetitive Motion Injuries (RMI)
- Repetitive Strain Injury (RSI),
- Cumulative Trauma Disorders (CTD)
- Overuse Syndrome (OS),
- Over-Exertion Injury, and
- Musculoskeletal Injury (MSI).

These different names are used to emphasize the fact that these injuries result when a given part of the body is subject to strain while performing a task.

Any work that has the following conditions can increase the risk of a WMSD:

- fixed and constrained postures (those that are awkward, and maintained for too long)
- repetitive movements by the same part of the body

- a force that is concentrated on small parts of the body, such as the hand or wrist
- high pace of movements that does not allow sufficient time for recovery between movements

Generally, none of these factors acts alone to cause WMSD. WMSDs usually occur as a result of the combination of factors.

> Most of the names listed above do not accurately describe the disorders. For example, the very common term "repetitive motion injury" (RMI) suggests that only "repetition" causes these disorders, but other causes such as awkward postures also contribute. We have chosen to use WMSD to reflect the many causes of these injuries.
>
> Equally, for reasons not fully understood, carpal tunnel syndrome (CTS) has become synonymous with many of the disorders suffered by office workers operating computers. In reality, carpal tunnel syndrome is considered a relatively rare medical condition.

ERGONOMIC HAZARDS AT WORK

Hazard Type	Causes	Prevention
Eye strain / headaches	Poor lighting Glare/flicker on screen Awkward posture	Adequate lighting Proper workstation design Equipment maintenance
Work-related Musculoskeletal Disorders (WMSDs)	Repetitive tasks Poor posture/incorrect seating Poorly designed environment Incorrectly placed VDTs or work equipment Lack of/or improper training in manual material handling techniques Awkward posture	Proper workstation Adequate job design Comfortable work workstations Training in proper lifting procedures Proper chairs and workstations Scheduled breaks

How do WMSDs occur?

WMSDs do not happen as a result of a single accident or injury, but rather they develop gradually as a result of repeated trauma.

WMSD primarily affects the hands, wrists, shoulders and arms. The following are some of the warning signs:

- Pain: burning or aching
- Fatigue
- Tingling, numbness
- Loss of grip, clumsiness
- Stiffness: difficulty in closing or opening door knobs
- Reduced control or coordination of body movements
- Hypersensitivity: tenderness to the touch

Different types of WMSDs are often known by many different names depending on the type of injury and affected body part. The following table summarizes symptoms of some common injury types.

ERGONOMIC HAZARDS AT WORK

Type of Injury	Example of Disorder	Symptoms
Muscle	Sprains, strains, torn muscles	Pain; difficulty in turning, bending and moving the muscle
Nerve	Carpal tunnel syndrome (CTS)	Compression of the median nerve as it enters the palm of the hand through "carpal tunnel". The symptoms are pain and numbness in the index and middle fingers and weakness of the abductor muscles of the thumb (difficulty in gripping things)
	Thoracic Outlet Syndrome	Pain, arm weakness, and numbness in the arms and fingers as a result of the squeezing of the nerves and blood vessels between the neck and shoulders
Tendon	Tendonitis	Pain mainly in the hands and wrist due to inflammation of the tendon as a result of overuse. Tendons are fibre bundles that attach muscles to bones
	Tenosynovitis	Pain due to inflammation of the tendon sheath, producing pain and swelling. It may result from loss of lubricating system of the bone joints as a result of repetitive and excessive hand movement
	Ganglion Cyst	An inflamed tendon sheath may swell with lubricating fluid. This swelling causes a bump under the skin called a ganglion cyst
	Bursitis	Restriction and pain in joint movement as a result of deficient lubrication at a bone joint, for example at the shoulder

What are the risk factors for WMSDs?

WMSDs arise from ordinary arm and hand movements such as bending, straightening, gripping, holding, twisting, clenching and reaching. These movements are not particularly harmful during ordinary activities of daily life. Work that includes the following characteristics can create the potential for harm:

- Awkward, fixed or constrained body positions
- Continual repetition of movements,
- Force concentrated on small parts of the body (such as the hand or wrist), and
- In particular – pace of work that does not allow for sufficient recovery between movements

Body Position

The following are some examples of awkward body positions:

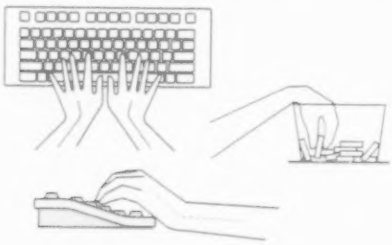
- Working with the torso bent forward, backward or twisted.
- Reaching above shoulder level.
- Bending the wrist forward, backward, or side-to-side.
- Fixed position of the neck and the shoulders when performing controlled arm movement.

Inadequate workstation design may require a fixed awkward body position or an awkward wrist position, thus contributing to all the above sources of WMSD risk.

Example

To perform any controlled movement of the arm (such as typing or sorting), the person must stabilize the shoulder and neck region. Muscles in the shoulder and the neck contract and stay contracted to hold position stable. Contracted muscles squeeze blood vessels, and this restriction reduces the flow of blood all the way down to the hand where, because of the intense muscular effort in the hand,

the blood is needed most. As a result, both the neck-shoulder area becomes fatigued even though there is no movement, and the arm-hand becomes fatigued – making both areas more susceptible to injury.



Hazardous hand positions

Repetition of Movements

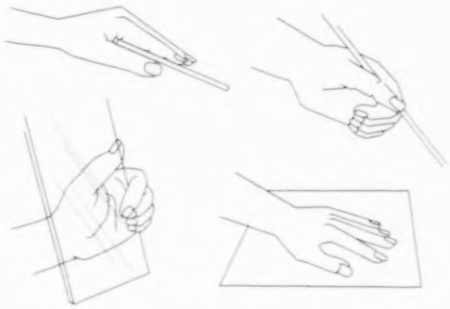
While employees who perform highly repetitive tasks are at the highest risk for WMSDs, tasks requiring repetitive movements always involve other risk factors including fixed body position, force and pace of work. With time, the effort to maintain repetitive movements – even if they involved minimal forces – steadily increases. When the work activity is continued in spite of the developing fatigue, injuries can occur.

Force

The more force required equals more muscular effort, and consequently, a longer time is needed to recover between tasks. In repetitive work, there generally is not enough time to recover and as such fatigue develops much faster when in combination with forceful movements.

Different hand positions will require different amounts of force – in general pinching and pressing require more effort. In addition, the weight and shape of tools or objects will add to the amount of force needed.

Tools that do not allow the best position of the wrist, elbow and shoulder also substantially increase the force required.



Exerting force in various hand positions (pinch and press)

Pace of Work

Pace of work determines the amount of time available for rest and recovery of the body between cycles of a particular task. The faster the pace, the less time available for recovery and the higher risk for WMSD.

In addition, when the worker has no control over timing and speed of work (because of factors such as assembly line speed or quota systems), then stress levels also increase. With higher stress comes muscle tension causing additional fatigue and consequently increased risk of WMSD. Controlling the pace of work externally denies the workers the flexibility to determine their own work speed. It is a human trait to work at varying rates at different times of the day.

What to do if you notice symptoms of WMSD

People who notice symptoms of WMSD or suspect that they may have an WMSD should see a doctor immediately. Diagnosis of repetitive motion injuries is confirmed by performing laboratory and electronic tests that determine the degree of nerve or muscle damage. Self-diagnosis and self-treatment of WMSD is not advisable. At the same time, report the condition to your manager/employer and the Joint Health and Safety Committee. They will explore the feasibility of adjusting your workstation, equipment and work environment to help alleviate the problem.

What is an Ergonomics Program?

An ergonomics program involves using a systematic approach to reducing risks from ergonomic hazards. The program must:

- have the support of senior management,
- clearly state its objectives and rationale,
- provide steps to follow, and
- assign authority, responsibility and deadline for each step.

An ergonomics program includes the following basic components:

- Hazard identification – worksite evaluation
- Implementation of solutions – improving workplace conditions and work practices
- Training and education of employees to work safely
- Evaluation of the effectiveness of solutions
- Continuous improvement of the program for better results

There is no universal ergonomics program that applies to all workplaces. A suitable program is one which is tailored to meet specific needs of a particular workplace by taking into account production requirements, staff capabilities and the risks due to WMSD.

Reminder

Know whom to contact if you have ergonomic concerns at work. While most of the time your supervisor can help, you can also ask your safety professional, human resources department, or a member of the joint health and safety committee for help.

How to Identify Ergonomic Hazards

The recognition of ergonomic hazards is important for prevention. Look for areas, conditions, or practices where improvement needs to be made.

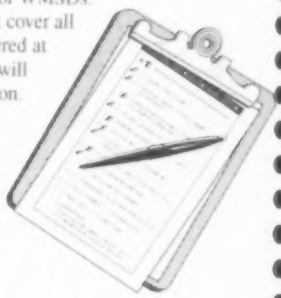
A team should coordinate the hazard recognition process. The members of the team should be representatives of management and workers, health and safety specialists, and engineers, if possible.

Hazard recognition is an ongoing process. It includes the following steps:

1. Identify existing or potential WMSD problems at their earliest stages. A good strategy uses, among other things, inspections, health surveys and checklists. Educate employees on the early signs and symptoms of WMSD so they know what and when to report.
2. Ask specific questions about health as it relates to their work. Remember that some people may not consider aches or discomfort a health condition *worth* reporting. Be sure to phrase your questions to include all possibilities. You may conduct a survey, or ask face-to-face.

3. Repeat a health survey every six months or annually to monitor whether the WMSD situation is getting better or worse. This review is especially important to evaluate any changes made to reduce the risks of WMSDs.

4. Use checklists to help identify features of jobs and workplaces that are potential risk factors for WMSDs. One checklist may not cover all the problems encountered at your workplace but it will provide a basis for action. Customize existing checklists to meet the specific needs of different jobs and workplaces.



Sample checklist questions are located in Appendix A1 of this Guide.

How can ergonomic issues be prevented?

As part of an ergonomic program, solving ergonomic issues includes looking at:

1. the workstation design,
2. the work environment and
3. job design.

A workstation that does not match the worker's shape, size and capabilities may hinder their task performance. A poorly designed workstation may pose undue physical stress on the worker due to:

- awkward posture,
- application of force,
- need for repetitive movements or
- a combination of these factors.

Such conditions may cause discomfort, fatigue and consequently, injury. Ideally, workstations should be fully adjustable, providing the employee the optimal fit to his/her body size and shape.

Adequate environmental conditions in the work environment are also important for the overall well-being of workers and productivity. When the work area is too cold or too hot, poorly lit, noisy, poorly ventilated, or contains unpleasant odours it results in annoyance, stress, fatigue, eye strain, headache and other conditions. Injuries and illnesses related to poor ergonomic conditions can be prevented by making the workplace and the work organization fit the physical and mental needs of each individual worker.

Job design is discussed in Section III of this guide.

3. Environmental Tobacco Smoke

Environmental tobacco smoke (ETS) refers to exposure to tobacco smoke – not from you smoking, but from being exposed to someone else's cigarette, cigar, or pipe smoke. ETS can also be described as the material in indoor air that originates from tobacco smoke. Breathing in ETS is known as passive smoking, second-hand smoke, or involuntary smoking.

Research into the health effects of ETS

While no single study can say that there is a 100% chance of health problems as a result of exposure to ETS, an association between ETS and various health conditions is considered very likely because there is:

- the proven link between heart diseases and lung cancer to active smoking,
- the presence of several known carcinogens in environmental tobacco smoke, and
- the general acceptance that the risks of certain diseases are directly related to the amount of tobacco smoke inhaled.

Can ETS interact with other chemicals or materials in the workplace?

Yes. It has been shown that tobacco smoke can interact with other materials and chemicals in the workplace.

Cigarette smoke can:

- transform existing chemicals into more harmful ones
- increase exposure to existing toxic chemicals
- add to the biological effects caused by certain chemicals, and
- interact synergistically with existing chemicals (the effects will be more than the sum of the effects from the exposure to each chemical or material alone). (Also known as multiplicative effects)

ENVIRONMENTAL TOBACCO SMOKE INTERACTION

Occupation	Exposure	Smoking/Occupation Interaction	Disease
Asbestos workers, construction workers and others in contact with asbestos	Asbestos	Additive, Multiplicative	Lung Cancer Chronic Lung Disease
Aluminum smelter workers	Polynuclear aromatic hydrocarbons (PAHs)	Additive or Multiplicative	Bladder Cancer
Cement workers	Cement dust	Additive	Chronic bronchitis Obstructive lung disease
Chlorine manufacturing	Chlorine	Additive	Chronic obstructive lung disease
Coal miners	Coal dust	Additive	Chronic obstructive lung disease
Copper smelter workers	Sulphur dioxide	Additive	Chronic obstructive lung disease
	Arsenic	Additive or Multiplicative	Lung Cancer

Occupation	Exposure	Smoking/Occupation Interaction	Disease
Grain workers	Grain dust	Additive	Chronic bronchitis Obstructive lung disease
Organic chemicals	Carcinogens	Additive or Multiplicative	Cancer of various organs and tissues
Rock cutters, foundry workers	Silica dust	Additive	Chronic obstructive lung disease
Textile workers	Cotton, hemp, flax, dust	Probably Multiplicative	Acute airway obstruction (byssinosis) Chronic bronchitis
Uranium miners and many other workers in radioactive environments	Alpha radiation (Radon)	Probably Multiplicative	Lung cancer
Welders	Irritant gases, metal fumes, dusts, (Radon)	Additive	Chronic bronchitis Obstructive lung disease

Source: Rudnick, J. 1998. *Smoking Control in the Workplace*. In the Encyclopaedia of Occupational Health and Safety, 4th edition (with changes).

Should tobacco smoking be restricted at the workplace?

Restricting smoking in the workplace can be part of a complete health and safety and/or a health promotion program in the workplace. It is very important to remember that for many workers, exposure to tobacco smoke is just one of the many hazards they face on a regular basis. While most people would be in agreement that exposure to ETS should be addressed, it should be done as part of a complete occupational health program and it should not take away resources or distract attention from other hazards that may be present.

Traditionally, smoking has not been allowed in situations that involve working with flammable, combustible and/or explosive materials. In these situations tobacco smoking is not restricted to protect people from the health effects of ETS but rather to protect them from the obvious fire and explosion hazards.

In other situations, smoking has been banned as a measure to prevent hand-to-mouth digestion of chemicals. Food, drink, and cigarettes are frequently contaminated by contact with unwashed hands, gloves or clothing, or by being left exposed in the workplace.

Since the early 1990s, however, health concerns about exposure to ETS have broadened legislation.

Generally speaking, what do the regulations say?

Some jurisdictions have banned smoking from the building entirely while others have restricted smoking to specific rooms or areas. In some cases, smoking is restricted in public buildings (including government offices) but the restriction does not apply to other workplaces.

Where smoking is permitted in a specific room or area, these areas must meet certain criteria in terms of the uses of the room and ventilation.

Where smoking is not permitted, it is often restricted from any area that is considered a workspace. A *workspace* may mean any indoor or other enclosed area in which employees perform their duties, and includes any adjacent corridor, lobby, stairwell, elevator, cafeteria, washroom or other common areas. In some workplaces, this ban has been extended to include company vehicles as well.

Public entertainment facilities (such as restaurants, bars and games rooms) and other establishments (such as long-term residential facilities including extended care facilities and prisons) present a unique situation. Debate has centred on two main concerns: on one hand these places are public spaces or they are a residence where smoking has traditionally been permitted, but on the other hand it is a workplace and the rights of the employees need to be considered. Contact your local provincial or municipal authority to determine what the law is for your area or situation.

Options For A Workplace Policy

Smoking restriction policies range from minor measures to total bans.

Initially some companies attempted to deal with the smoking problem by segregating smokers and non-smokers. Although this approach is intended to satisfy both smokers and non-smokers, it is not entirely effective.

In practice, there are basically two options to consider:

1. A *smoke-free* policy that does not allow smoking inside any building or company vehicle. It may or may not permit smoking in designated outdoor locations.
2. A policy that allows for separately ventilated areas.

PROS and CONS

Policy	Pros	Cons
Smoke-free	Complies with all laws Greatly reduces ETS exposure for all employees Decreases maintenance costs Easy to administer and enforce Low cost	Requires smokers to modify habits Inconvenience to employees who smoke If not properly managed, smokers may be disproportionally absent from work stations May incur some cost if outside shelters are constructed
Seperately Ventilated Area	Complies with most laws Reduces non-smoking employees exposure Allows employee to remain inside to smoke	Ventilation systems may not adequately protect from ETS Construction of separate space and ventilation system may be necessary Costs involved with above points

Example of Smoking Areas

Requirements usually include that the room be:

- clearly identified to the workforce by signs or other effective methods
- equipped with ashtrays or non-combustible covered receptacles for the disposal of waste
- if indoors, provide a separate, non-recirculating exhaust ventilation system.
- if outdoors, a safe location, or room structurally separated from other work or break areas

Except in an emergency, an employee should not have to enter an indoor smoking area if they choose not to.

If outdoors, the area should not be by the entrances to the building where non-smokers have to pass by to enter the building. It should be a separate area, sheltered if possible, which is away from the building's air intake vents. Local weather conditions will play a role in determining what type of shelter is needed.

If indoors, ventilation requirements often include that the smoking area:

- meet the requirements for a smoking lounge specified in Canadian Standards Association (CSA)'s Z204-94 Guideline for Managing Indoor Air Quality in Office Buildings, American Society of Heating, Refrigerating, and Air Conditioning Engineers (ASHRAE) Standard 62 Ventilation for Acceptable Indoor Air Quality (1999 or 1999 version may be cited) or other standard acceptable to the local authority.
- be enclosed by walls, a floor and a ceiling. Other structural elements may include sealing ducts and pipes that enter into the room, applying weather stripping to doors, and using automatic door closing devices.
- be designed in accordance with expected occupancy rates.
- discharges air directly to the outdoors (air must not be recirculated within the building or mixed with the general dilution ventilation for the building).
- maintains adequate air flows from non-smoking to smoking areas (smoking area should have a slight negative pressure to ensure airflow into the smoking area rather than back into the general workplace).
- have the intake or exhaust openings positioned to prevent smoke movement into adjoining rooms and areas.

Limitations to Using General Ventilation to *Clean* the Air

Increasing ventilation is often proposed as one way to control concentrations of ETS. Typically systems are designed to maximize human comfort. However, cost and energy constraints must be considered and, therefore, the goal of maximal comfort is often compromised. Many researchers have concluded that attempts to reduce smoke contamination by ventilation are futile since they require ventilation rates far in excess of what is economical. There is a growing consensus that, while some adjustments to workplace ventilation systems may reduce tobacco smoke, the effectiveness of this approach is limited.

Ventilation rates for smoking are based on various factors such as odour noticed by visitors to a room, irritation experienced by non-smoking occupants, haze (smokiness), or concentrations of smoke contaminants. Tobacco smoke odours are very difficult to control by ventilation and require high ventilation rates. Also, standard filtration systems in buildings do not remove carbon monoxide or any of the other gases present in tobacco smoke.

In addition, if ETS is present, general ventilation requirements may not apply since human carcinogens or other harmful contaminants are suspected to be present. ETS falls into this category based on its association with lung cancer and other adverse health effects such as heart disease. Under these circumstances, other relevant standards or guidelines (e.g., local workplace exposure limits) may supersede the ventilation rate procedure.

Introducing a Smoking Policy

In many respects, tobacco smoke is like any other workplace air contaminant. It can be reduced or eliminated by controlling emission at the source and by instituting policies and procedures to ensure the safety of all employees.

The key to a successful smoking program or policy is to ensure, through discussion, that it has support from the majority of staff and management. The transition to a smoke-free workplace can be implemented through specific steps. All employees should be included in the planning process. Open discussions should take place on the kinds of policies that might work and how they should be enforced. As a rule, a strong policy needs to have the backing of all the groups which are covered by it. Employees should be kept informed of each step.

If an organization has committed itself to a smoke-free work environment, it should be prepared to enforce its smoking ban unconditionally. For example, allowing supervisory personnel to smoke because they may work in enclosed offices promotes resentment among smokers who are not allowed to smoke in open areas.

Should a company offer smoking cessation programs?

To help those employees who want to stop smoking, companies often sponsor or subsidize smoking cessation programs. In general, smoking cessation programs must be targeted to a specific audience, and the primary goal is one that is long term. It tends to work poorly when it is the *only* wellness program offered so be sure to offer it along with healthy eating, active living and other programs.

Tips for Starting a Smoking Cessation Program

☑ UNDERSTAND that not every smoker wants to quit, while others are not ready to quit at the time you are offering your program. Quitting smoking is a very personal decision.

DEVELOP and implement your Workplace Smoke-free Policy first if you don't have one already. Inform employees of the policy's intentions and allow for adjustment period before the policy is enforceable.

DETERMINE what programs were offered in the past and what was their success.

DETERMINE if there is sincere interest in a cessation program. (Will people attend?)

FIND OUT what resources within the company and the community can help. Many major organizations such as the Canadian Cancer Society and the Heart and Stroke Foundation offer programs and materials to support people who wish to quit smoking.

OFFER a variety of programs for people to try. Some people will like group settings while others will like individual counselling.

OFFER other programs such as healthy eating, relaxation techniques, and active living at the same time.

OFFER appropriate incentives for milestones (one week, three months, six months, one year).

EMPHASIZE the health benefits of not smoking.

☒ DO NOT SELL tobacco products at the workplace.

Sample

SMOKE-FREE WORKPLACE POLICY

ABC COMPANY

ABC Company Inc. has instituted this policy to provide a smoke-free environment for all employees and visitors. This policy covers the smoking of any tobacco product and the use of smokeless (or spit) tobacco.

Smoking will not be allowed within the building at any time nor in company vehicles. Smoking will be allowed in designated smoking areas outside the building.

All materials used for smoking, including cigarette butts and matches, will be extinguished and disposed of in appropriate containers as provided. Supervisors will ensure periodic cleanups of the designated smoking area.

Supervisors will discuss smoking breaks with their staff. Together they will develop an effective solution that will not interfere with productivity but allow for the wishes of the employee to be met.

Procedure

Employees will be informed of this policy through signs posted in buildings and vehicles, the policy manual, and will receive orientation and training from their supervisors.

Visitors will be informed of this policy by signs and their host will explain it.

The company will assist employees who wish to quit smoking by facilitating access to recommended smoking cessation programs and materials.

Any violations of this policy will be handled through standard disciplinary procedures.

John Smith
CEO, ABC Company

Adapted from: *Making Your Workplace Smokefree: A Decision Maker's Guide* by the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.

4. Scent-Free Policy

Can scents cause health problems?

The issue regarding the health effects of perfumes and other scented products in workplaces, hospitals, schools and other places is controversial. There are conflicting reports of the effects that scents may or may not cause in certain individuals. More research is needed and some is being undertaken.

When scents have been blamed for adversely affecting a person's health, some or all of the following symptoms are reported:

- headaches
- dizziness, light-headedness
- nausea
- fatigue
- weakness
- insomnia
- malaise
- confusion
- loss of appetite
- depression
- anxiety
- numbness
- upper respiratory symptoms
- shortness of breath
- difficulty with concentration
- skin irritation

Allergic and asthmatic patients report that certain odours, even in the smallest amounts, can trigger an attack. In addition, those persons with *multiple chemical sensitivity* may also be affected. (Please note that several medical associations have not recognized multiple chemical sensitivity as a 'legitimate organic disease' at this time.)

The severity of these symptoms can vary. Some people report mild irritation while others are "incapacitated" and/or must give up many 'normal' activities in order to avoid exposure (such as going to public places).

What types of products contain scents?

Scents are included in a very large range of products including:

- shampoo and conditioners
- hairsprays
- deodorants
- colognes & aftershaves
- fragrances & perfumes
- lotions & creams
- potpourri
- industrial and household chemicals
- soaps
- cosmetics
- air fresheners & deodorizers
- oils
- candles
- diapers
- some types of garbage bags

It is very common for persons reporting reactions to any of the above scented products to also report reacting to many other substances such as:

- building materials that give off volatile organic compounds
- combustion exhausts (from cars, trucks, etc)
- cigarette smoke.

It is important to remember some products which claim to be *scent free* may have only masked the scent by use of an additional chemical. Be sure to research any product carefully when using them around those who are sensitive.

Are there carcinogens in fragrances?

While it depends on the formula, there can be chemicals in fragrances and related products that have been determined to cause cancer in occupational settings or in laboratory animals. While the use of a wide range of chemicals in one perfume or cologne is common, the amount used is often very small. To record carcinogenic effects, much higher amounts of the product are required than what is typically found in fragrances.

Implementing A Scent-Free Policy In The Workplace

A situation may create the need for a scent-free policy. As with most workplace policies, be sure to consider the following:

☑ CONDUCT a survey to determine the extent of the problem. Collect opinions and suggestions at the same time to help develop a policy appropriate to your workplace. (Sample survey questions are located in Appendix A1.)

DESIGNATE one key person to oversee the project. If you work at a large company, it may better to create a committee with members representing all groups (employees, unions, management).

INVOLVE the health and safety committee, and secure management commitment from the beginning.

SET and STICK TO deadlines for creating a draft policy, a review of the policy, and for implementation.

BE SURE that all employees have been fully informed before the policy becomes effective.

EDUCATE the employees. Include brochures or flyers in payroll envelopes, publish articles in company newsletter, or give presentations.

ADDRESS concerns the employees raise. Reinforce that the policy is being implemented as a result of medical concerns - not because of a dislike for a certain smell.

MAKE IT CLEAR that the policy applies to everyone (including visitors, patients, etc).

SEARCH local legislation for any supporting documentation.

POST a list of *approved* unscented products and where they are available locally.

REVIEW all MSDSs for the products currently used and for those you are considering using. Make sure that the ingredients are acceptable. Some products that claim to be scent-free may be using additional chemicals to mask smells instead of truly being *unscented*.

CONDUCT trials in limited areas before purchasing large quantities of a product.

POST notices that waxing, shampooing, painting, or spraying (etc.) will be conducted one week beforehand so that affected personnel can make arrangements or have their duties modified during that time.

LET EVERYONE KNOW that the policy will be reviewed and can be changed because of experience or new knowledge.

☒ DO NOT LIMIT the scent free policy to perfumes and colognes. As listed above, many cleaning and personal care products also have scents.

What is an example of a policy?

Policies should be based on the health concerns of employees – especially those who have sought medical help. Keep the policy short, but specific. The policy must also apply uniformly throughout the company.

SCENT-FREE ENVIRONMENT POLICY

ABC COMPANY

ABC Company Inc. has instituted this policy to provide a scent-free environment for all employees and visitors. While we acknowledge that the medical community is uncertain if there is a cause-and-effect relationship between scents and disease, we respect the fact that members of this company are experiencing symptoms.

The use of scented products will not be allowed within the building at any time. In addition, all materials used for cleaning will be scent-free (where ever possible). A list of locally available scent-free products is available from the health and safety office.

Employees will be informed of this policy through signs posted in buildings, the policy manual, promotional materials and will receive orientation and training. Visitors will be informed of this policy through signs and their host will explain it to them.

Any violations of this policy will be handled through standard disciplinary procedures.

Management

What can the posted notice say?

Signs can be posted near the entrances to company building(s). In addition, if you wish to have visitors comply with the scent-free policy, statements on business cards, letterhead or promotional materials may be helpful.

Examples

Some people who work at ABC Company report sensitivities to various chemical-based or scented products. We ask for everyone's cooperation in our efforts to accommodate their health concerns.

In response to health concerns, ABC Company has developed a Scent-Free Policy. Scented products such as hair spray, perfume, and deodorant can trigger reactions such as respiratory distress and headaches. Staff and visitors are asked to not use these products when reporting to this office.

ABC Company is a Scent-free environment. Please do not use scented products while at work.

Are there alternatives to a scent-free policy?

Try to identify the exact source of the problem, if possible. Reduce all emissions from building materials, cleaning products, etc.

Maintain good indoor air quality. Ensure that air is being replaced with fresh air, and that scents are not simply being recycled throughout the building.

If the *source* is an employee, try asking the person to be sensitive to others who indicate concern about scents. They may try to:

- not wear the scent;
- wear a light[er] scent; or
- wear less of the scent.

A general guideline may be to ask that any scent should not be detectable at more than an arm's length from the individual.

Please see Appendix A1 for sample survey questions

Section III

Organizational Programs

1. Job Design
2. Employee Assistance Programs (EAPs)
3. Workplace Stress
4. Conflict Resolution
5. Harassment
6. Substance Abuse
7. Work / Life Balance
8. Flexible Work Arrangements
9. Telework / Telecommuting

1. Job Design

What is meant by "job design"?

Job design refers to the way that a set of tasks, or an entire job, is organized. Job design helps to determine

- what tasks are done,
- how the tasks are done,
- how many tasks are done, and
- in what order the tasks are done.

Job design takes into account all factors which affect the work, and organizes the content and tasks so that the whole job is less likely to be a risk to the employee. Job design involves administrative areas such as:

- job rotation,
- job enlargement,
- task/machine pacing,
- work breaks, and
- working hours.

A well designed job will encourage a variety of *good* body positions, have reasonable strength requirements, require a reasonable amount of mental activity, and help foster feelings of achievement and self-esteem.

Job design principles can address problems such as:

- work overload,
- work underload,
- repetitiveness,
- limited control over work,
- isolation,
- shiftwork,
- delays in filling vacant positions,
- excessive working hours, and
- limited understanding of the whole job process.

Job design is sometimes considered as a way to help deal with stress in the workplace. See the chapter on workplace stress in this guide for more information.

Job Design versus Workplace Design

Job design and workplace design are often used interchangeably because both contribute to keeping the physical requirements of a job reasonable. Job design refers to administrative changes that can help improve working conditions. In comparison, workplace design concentrates on the way the workstation, the tools, or the body position influences the way a person does his or her work. Good workplace design reduces static positions, repetitive motions and awkward body positions.

Features Of *Good* Job Design

Good job design accommodates employees' mental and physical characteristics by paying attention to:

- muscular energy such as: work/rest schedules or pace of work, and
- mental energy such as: boring versus extremely difficult.

Good job design:

- allows for employee input. Employees should have the option to vary activities according to personal needs, work habits, and the circumstances in the workplace
- gives employees a sense of accomplishment
- includes training so employees know what tasks to do and how to do them properly
- provides good work/rest schedules
- allows for an adjustment period for physically demanding jobs
- provides feedback to the employees about their performance.
- minimizes energy expenditure and force requirements
- balances static and dynamic work

Job design is an ongoing process. The goal is to make adjustments as conditions change within the workplace.

Common Approaches to Job Design

Achieving good job design involves administrative practices that determine what the employee does, for how long, where, and when as well as giving the employees choice where ever possible. In job design, you may choose to examine the various tasks of an individual job, or the design of a group of jobs.

Approaches to job design include:

Job Enlargement Job enlargement changes the jobs to include more and/or different tasks. Job enlargement should add interest to the work but may or may not give employees more responsibility.

Job Rotation Job rotation moves employees from one task to another. It distributes the group tasks among a number of employees.

Job Enrichment Job enrichment allows employees to assume more responsibility, accountability, and independence when learning new tasks or to allow for greater participation and new opportunities.

Work Design (Job Engineering) Work design allows employees to see how the work methods, layout and handling procedures link together as well as the interaction between people and machines.

Overall Goals of Job Design

Task Variety

To alleviate boredom, avoid both excessive static body positions and repetitive movements. Design jobs to have a variety of tasks that require changes in body position, muscles used, and mental activities. Two methods are job enlargement and job rotation. For example, if an employee normally assembles parts, the job may be enlarged to include new tasks such as work planning, inspection / quality control, or maintenance. Alternatively, the tasks

may include working in the same department, but changing tasks every hour. For example, in a laundry facility employees can rotate between various stations (sorting, washer, dryer, iron, etc.) as long as it provides for a change in physical or mental expenditure.

Work Breaks / Rest Breaks

Rest breaks help alleviate the problems of unavoidable repetitive movements or static body positions. More frequent but shorter breaks (sometimes called "micro breaks") are sometimes preferable to fewer long breaks.

During rest breaks, encourage employees to change body position and to exercise. It is important that employees stretch and use different muscle groups. If the employee has been very active, a rest break should include a stationary activity or stretching.

Allowance for an Adjustment Period

When work demands physical effort, have an adjustment period for new employees and for all employees after holidays, layoffs, or illnesses. Allow time to become accustomed to the physical demands of work by gradually *getting in shape*. Employees who work in extreme hot or cold conditions also need time to acclimatize.

Provide Training

Training in correct work procedures and equipment operation is needed so that employees understand what is expected of them and how to work safely. Training should be organized, consistent and ongoing. It may occur in a classroom or on the job.

Vary Mental Activities

Tasks should be coordinated so that they are balanced during the day for the individual employee as well as balanced among a group of employees. You may want to allow the employee some degree of choice as to what types of mental tasks they want to do and when. This

choice will allow the employee to do tasks when best suited to their 'alertness' patterns during the day. Some people may prefer routine tasks in the morning (such as checklists or filling in forms) and save tasks such as problem solving until the afternoon, or vice versa.

How can I use job design for teams?

Since most tasks are not done in isolation, job design is very often used for a group of employees. In some cases, teams can be created that have an overall responsibility for larger task or set of tasks. It is up to the team to decide how the job will be accomplished, which individual will do what tasks, and when. In most cases, team members will have many skills which allow them to change jobs from time to time. As with job design for individuals, additional opportunities such as inspection / quality control, maintenance, and related tasks such as ordering supplies are often assigned to the team in addition to their regular tasks.

How would I conduct a job design project?

Although there are many ways to carry out job design, the following stages are essential:

Assess the current work practices Is job design needed or feasible? Discuss the process with the employees and supervisors involved and be clear about the process, or any changes or training that will be involved.

Analyse the task Examine the job and determine exactly what the tasks are. Consider what equipment and workstation features are important for completing the tasks. Identify problem areas.

Design the job Identify the methods for doing the work, work/rest schedules, training requirements, equipment needed and workplace changes. Coordinate the different tasks so each one varies mental activities and body position. Be careful not to under or overload the job.

Implement the new job design gradually You may want to start on a small scale or with a pilot project. Train employees in the new procedures and use of

equipment. Allow for an adjustment period and time to gain experience with the new job design.

Re-evaluate job design on a continual basis Make any necessary adjustments.

You may also want to establish a committee to represent the various groups involved. Job design should involve employees, unions, the health and safety committee and managers during the entire process. Participation of all parties increases communication and understanding.

Be clear that purpose of the job design is to strengthen the operations and its workforce, not to eliminate jobs or sets of skills.

Examples

JOB AND WORKPLACE DESIGN CHECKLIST

Job Design		Yes	No
Task Variety	Repetitive tasks–are the same muscle groups or mental tasks done over and over?	❑	❑
	Static positions–are there few or no opportunities to change position?	❑	❑
	Fast work pace– is there muscle tension and stress?	❑	❑
Work/Rest Schedules	Long work period(s)– is there potential for fatigue?	❑	❑
Adjustment Period	Are there allowances for adjustment periods or varying pace of work for new/returning employees?	❑	❑
Training	Have employees had adequate training?	❑	❑
Mental Variety	Is there some variety or ability to choose what to do next?	❑	❑

2. Employee Assistance Programs (EAPs)

What is an EAP?

An EAP, or employee assistance program, is a confidential, short term, counselling service for employees with personal problems that affect their work performance. EAPs should be part of a larger company plan to promote wellness that involves written policies, supervisor and employee training, and, where appropriate, an approved drug testing program. EAPs are also known as Employee and Family Assistance Programs (EFAPs). This section will use "EAP" to refer to both types of programs.

Purpose of an EAP

The EAP offers help with the resolution of problems that are affecting work. These problems, however, do not have to be caused by workplace issues. Employee Assistance Programs are designed to help people understand or overcome their personal problems. While most EAPs offer a wide range of services, they often refer to other professionals or agencies that can offer more or extended care in particular areas.

Types of services offered by an EAP

The range of areas typically managed by an EAP provider include:

- personal issues
- job stress
- relationship issues
- eldercare, childcare, parenting issues
- harassment
- violence
- substance abuse
- separation and loss

- work / life balance
- financial or legal advice

Some EAP providers also offer services including retirement or lay-off assistance, and wellness / health promotion and fitness (such as weight control, nutrition, exercise, or smoking), advice on long-term illnesses, disability issues, counselling for crisis situations (e.g., death at work), or advice specifically for managers/supervisors in dealing with difficult situations.

Who can use an EAP?

EAPs are open to all employees and members of their immediate family.

What happens when a call is made to an EAP?

In most cases, an EAP telephone number is posted or otherwise distributed to staff members. When this number is dialed, the caller is connected to what is often known as a *referral agent*.

A *referral agent* could be someone from within the organization such as a health professional in the medical department, a union counsellor or an employee who has received EAP training. If there is no internal referral agent, the employee could be referred to an external EAP resource. Referral agents must be familiar with available community resources which could include social, financial and mental health services, professional counsellors, or ministers. A referral agent defines the specific nature of the problem and refers the person to the appropriate resource for assistance. The actual referral depends on the type of problem, the preference of the person, and the ability of the person to pay for the service (if costs are not otherwise covered by the EAP or insurance program).

When an employee voluntarily contacts an EAP provider, a confidential record is opened. The EAP provider will collect any necessary information and, depending on the severity of the problem and the capabilities of the EAP personnel, will decide if the problem can be handled by

the provider or if a referral is needed to an outside resource (such as a particular substance abuse program). Interviews are typically offered to the employee within a set period of time (e.g., interviews will be conducted within 24 or 48 hours) unless the situation is judged to be an emergency.

What happens with an EAP referral and who knows about it?

In an EAP, there are three types of referrals:

1. Self-referral where the employee seeks help on their own
2. The informal referral where a supervisor, friend or co-worker recommends the EAP.

   No record of these two types of referral appears in the employee's personnel file.

3. A formal referral is based on job performance and the supervisor recommends the EAP. This recommendation may or may not appear in the individual's personnel file depending on the situation. Often, no notation is made unless there is a need for formal disciplinary action. What is discussed during the sessions, however, is not reported to the employer in either case.

What makes an EAP successful?

Several factors make an EAP successful:

- strict confidentiality
- open to employees and their immediate families
- recognition and commitment by management, employees and union (if there is one) that an EAP is needed
- policies and procedures supported by top management, employees and the union
- establishment of both formal and informal referral procedures
- promotion of the EAP and encouragement to use the service

- managers and employees educated in the workings of the EAP
- periodic evaluation of the EAP to be sure the needs of both the employee and the employer are being met

In addition, the EAP must be monitored and evaluated to ensure continued quality of the referral/assistance and to correct potential trouble situations. An appropriate assessment, referral and follow-up of progress are important for continued success of the EAP.

Checklist for Hiring / Contracting EAP Provider

Hiring professional services, no matter what the service may be, requires some investigation. It is the client's responsibility to find a competent consultant who is qualified by education, knowledge, and experience. The following questions are not meant to be the only questions you may ask, but rather they are a start to your checklist.

1. What is the experience of the provider?
   a. How many years has the provider been serving these clients?
   b. Can the provider give you a list of references?

2. Where are the provider's offices located? (A local organization is generally preferred because they are familiar with the community and its resources.)

3. What is the provider's scope of services? Examples may include:
   - stress management,
   - child care or elder care referral,
   - wellness program,
   - counselling for crisis situations (e.g., a violent incident at work)
   - advice specifically for managers/supervisors in dealing with difficult situations

a. Exactly how would the organization provide services to our employees? For example, would the provider use an 800 number, referral network, on-site service, etc.

b. What is the policy on returning calls? How long before a call-back is placed (e.g., within 24 hours, 48 hours)?

4. How does the provider determine to whom the clients are referred? How and how often is the list of referral sources updated?

5. What is the provider's availability?

   a. How many staff members are available in typical and non-typical business hours?

   b. What services are available in non-typical business hours?

   c. What is the availability for swing shift employees?

6. How many counsellors are provided per employee?

   a. What are the backgrounds of the counsellors, i.e. education, credentials, years of experience, etc.?

7. What type of training is provided? (Employee orientation, management/union representative training, on-going education programs for employees)

8. Does the provider have a follow-up or utilization review service? If so, how is it done?

9. What kinds of return-to-work, aftercare, or support services are offered?

10. What types of publicity and promotion of EAP services would be offered?

11. What is the fee structure? (e.g., flat fee? Based on average usage statistics and number of employees? Per referral?)

12. What types of reports are produced for the employer? (e.g., number of referrals, what types, etc.)

3. Workplace Stress

Can "workplace stress" be defined?

We hear a lot about stress, but what is it? It is generally believed that some stress is good (sometimes referred to as *challenge* or *positive stress*) but when stress occurs in amounts that the individual cannot handle, both mental and physical changes may occur. Taber's Cyclopedic Medical Dictionary defines stress as "the result produced when a structure, system or organism is acted upon by forces that disrupt equilibrium or produce strain". In simpler terms, stress is the result of any emotional, physical, social, economic, or other factors that require a response or change.

Workplace stress then is the physical and emotional responses that can happen when there is a conflict between job demands on the employee and the amount of control an employee has over meeting these demands. In general, the combination of high demands in a job and a low amount of control over the situation can lead to stress and related health effects. Research has also shown that the combinations of *High Effort* and *Low Reward* as well as the sense that one is being treated *fairly* are significant contributing factors to stress on the job.

As such, stress in the workplace can have many origins or come from one single event. It can impact on both employees and employers alike. As stated by the Canadian Mental Health Association:

> Fear of job redundancy, layoffs due to an uncertain economy, increased demands for overtime due to staff cutbacks act as negative stressors. Employees who start to feel the *pressure to perform* can get caught in a downward spiral of increasing effort to meet rising expectations with no increase in job satisfaction. The relentless requirement to work at optimum performance takes its toll in job dissatisfaction, employee turnover, reduced efficiency, illness and even death. Absenteeism, illness, alcoholism, "petty internal politics", bad or snap decisions, indifference and apathy, lack of motivation or creativity are all by-products of an over stressed workplace.

Good and Bad Stress?

Some stress is normal. In fact, it is often what provides us with the energy and motivation to meet our daily challenges both at home and at the workplace. Stress in these situations is the kind that helps you *rise* to a challenge and meet your goals such as deadlines, sales or production targets, or finding new clients. Some people would not consider this challenge a type of stress because, having met the challenge, they are satisfied and happy.

However, as with most things, too much stress can have negative impacts. When the feeling of satisfaction turns into exhaustion, frustration or dissatisfaction, or when the challenges at work become too demanding, we begin to see negative signs of stress.

Stress at Work

In the workplace, stress can be the result of any number of situations. Some examples include:

Examples

WORK-RELATED STRESS

Categories of Job Stressors	Examples
Factors unique to the job	Workload (overload and underload) Pace / variety / meaningfulness of work Autonomy (e.g., the ability to make your own decisions about our own job or about specific tasks) Shiftwork / hours of work Physical environment (noise, air quality, etc.) Isolation at the workplace (emotional or working alone)
Role in the organization	Role conflict (conflicting job demands, multiple supervisors/managers) Role ambiguity (lack of clarity about responsibilities, expectations, etc.) Level of responsibility
Career development	Under/over-promotion Job security (fear of redundancy either from economy, or a lack of tasks or work to do) Career development opportunities Overall job satisfaction
Relationships at work (Interpersonal)	Supervisors Coworkers Subordinates Threat of violence, harassment, etc. (threats to personal safety)
Organizational structure/climate	Participation (or non-participation) in decision-making Management style Communication patterns

From: Murphy, L. R. "Occupational Stress Management: Current Status and Future Direction" in Trends in Organizational Behavior. 1995. Vol 2., pp1-14 with changes

Can stress cause adverse health effects?

Yes, stress can have an impact on your overall health. The body's *pre-programmed* response to stress has been called the "Generalized Stress Response" and includes increases in:

- blood pressure
- metabolism (e.g., faster heartbeat, faster respiration)
- cholesterol and fatty acids in blood for energy production systems
- blood clotting
- production of blood sugar for energy
- stomach acids

as well as:

- decrease in protein synthesis, intestinal movement (digestion), immune and allergic response systems
- localized inflammation (redness, swelling, heat and pain)

From: Workplace Safety and Insurance Board of Ontario, 1999. "Basic Certification Training Program: Participant's Manual"

Luckily, there are usually a number of warning signs that help indicate when you are having trouble coping with stress before any severe signs become apparent. These signs are listed on page 106.

General Tips for Dealing with Stress at the Workplace

Since the causes of workplace stress vary greatly, so do the strategies to reduce or prevent it. For example, where a physical agent is the cause, it is best to control it at its source. If the workplace is too loud, control measures to deal with the noise should be implemented wherever possible. If you are experiencing pain from repetitive strain, workstations can be re-designed to reduce repetitive and strenuous movements.

As mentioned in this guide, job design is also an important factor. Good job design accommodates an employee's mental and physical abilities. In general, the following job design guidelines will help minimize or control workplace stress:

- the job should be reasonably demanding (but not based on *sheer endurance*) and provide the employee with at least a minimum of variety in job tasks
- the employee should be able to learn on the job and be allowed to continue to learn as their career progresses
- the job should comprise some area of decision-making that the individual can call his or her own
- there should be some degree of social support and recognition in the workplace
- the employee should feel that the job leads to some sort of desirable future

What can the employer do to help?

Employers should assess the workplace for the risk of stress. Look for:

- Pressures at work which could cause high and long lasting levels of stress, and
- Who may be harmed by these pressures.

Determine what can be done to prevent the pressures from becoming negative stressors.

Employers can address stress in many ways.

☑ TREAT all employees in a fair and respectful manner.

TAKE stress seriously and be understanding to staff under too much pressure.

BE AWARE of the signs and symptoms that a person may be having trouble coping with stress. A list is provided on page 106.

INVOLVE employees in decision-making and allow for their input directly or through committees, etc.

ENCOURAGE managers to have an understanding attitude and to be proactive by looking for signs of stress among their staff.

PROVIDE workplace health and wellness programs that target the true source of the stress. The source of stress at work can be from any number of causes – safety, ergonomics, job demands, etc. Survey the employees and ask them for help identifying the actual cause.

MAKE SURE staff have the training, skills and resources they need.

DESIGN jobs to allow for a balanced workload. Allow employees to have control over the tasks they do as much as possible.

KEEP job demands reasonable by providing manageable deadlines, hours of work, and clear duties as well as work that is interesting and varied.

PROVIDE Employee Assistance Programs (EAPs) for those who wish to attend.

DO NOT TOLERATE bullying or harassment in any form.

DO NOT IGNORE signs that employees are under pressure or feeling stressed.

DO NOT FORGET that elements of the workplace itself can be a cause of stress. Stress management training and counselling services can be helpful to individuals, but do not forget to look for the root cause of the stress and to address them as quickly as possible.

Are there organizations that can help?*

Yes, there are many. Many agencies and consultants can assess the workplace as a whole and offer appropriate training courses.

For individuals, a family doctor can often recommend a professional for their patients. Other examples include: the Employee Assistance Programs (EAP) or associations such as the Canadian Mental Health Association (CMHA) or the Canadian Centre on Substance Abuse (CCSA) to name just a few.

EAP programs are confidential, short term, counseling services for employees with problems that affect their work performance. Companies often purchase the services of EAP providers. Check with your human resources department (or equivalent) for contact information.

Canadian Mental Health Association's (CMHA) programs are meant to ensure that people whose mental health is endangered will find the help needed to cope with crisis, regain confidence, and return to community, family and job. They can be reached on the Internet at http://www.cmha.ca/

The Canadian Centre on Substance Abuse (CCSA) promotes informed debate on substance abuse issues, and disseminates information on the nature, and assists organizations involved in substance abuse treatment, prevention and educational programming. They can be reached on the Internet at http://www.ccsa.ca/

The Canadian Health Network provides reliable information on mental health matters and many other health concerns at http://canadian-health-network.ca

* We have mentioned these organizations as a means of providing a potentially useful referral. You should contact the organization(s) directly for more information about their services. Please note that mention of these organizations does not represent a recommendation or endorsement by CCOHS of these organizations over others of which you may be aware.

How do I know if someone is (or if I am) having trouble coping with stress?

There are many different signs and symptoms that can indicate when someone is having difficulty coping with the amount of stress they are experiencing:

Physical

Headaches, grinding teeth, clenched jaws, chest pain, shortness of breath, pounding heart, high blood pressure, muscle aches, indigestion, constipation or diarrhea, increased perspiration, fatigue, insomnia, frequent illness.

Psychosocial

Anxiety, irritability, sadness, defensiveness, anger, mood swings, hypersensitivity, apathy, depression, slowed thinking or racing thoughts, feelings of helplessness, hopelessness, or of being trapped.

Behavioural

Overeating or loss of appetite, impatience, quickness to argue, procrastination, increased use of alcohol or drugs, increased smoking, withdrawal or isolation from others, neglect of responsibility, poor job performance, poor personal hygiene, change in religious practices, change in close family relationships.

Do all of these signs or symptoms happen all at once and what level of help should be sought?

No, normally, not all signs appear, nor do they show up at the same time. The signs and symptoms from stress tend to progress through several phases or stages. The phases can be described as in the following chart.

SIGNS / SYMPTOMS OF STRESS

	Phase Description	Signs/Symptoms	Action
Phase 1	**Warning** Early warning signs are often more emotional than physical and may take a year or more before they are noticeable.	Feelings of vague anxiety Depression Boredom Apathy Emotional fatigue	Talk about feelings Take a vacation Make a change from regular activities Take time for yourself
Phase 2	**Mild Symptoms** Warning signs have progressed and intensified. Over a period of 6 to 18 months, physical signs may also be evident.	Sleep disturbances More frequent headaches/colds Muscle aches Intensified physical and emotional fatigue Withdrawal of contact with others Irritability Intensified depression	More aggressive lifestyle changes may be needed. Short-term counseling
Phase 3	**Entrenched Cumulative Stress** This phase occurs when the above phases continue to be ignored. Stress starts to create a deeper impact on career, family life and personal well-being.	Increased use of alcohol, smoking, non-prescription drugs Depression Physical and emotional fatigue Loss of sex drive	Help from medical and psychological professionals is highly recommended.

Phase 3 cont.

Phase 4

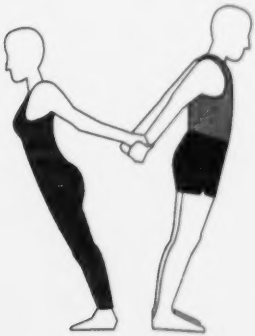
Phase Description	Signs/Symptoms	Action
Entrenched Cumulative Stress *... continued*	Ulcers Marital discord Crying spells and intense anxiety Rigid thinking Withdrawal Restlessness and Sleeplessness	Help from medical and psychological professionals is highly recommended.
Severe/ Debilitating Cumulative Stress Reaction This phase is often considered *self-destructive* and tends to occur after 5 to 10 years of continued stress.	Careers end prematurely Asthma and heart conditions Severe depression Lowered self-esteem/self-confidence Inability to perform one's job Inability to manage personal life Withdrawal Uncontrolled anger, grief, rage Suicidal or homicidal thinking Muscle tremors Extreme chronic fatigue Over-reaction to minor events Agitation Frequent accidents Carelessness, forgetfulness Paranoia	Significant intervention by professionals.

From: Anschuetz, B.L. "The High Cost of Caring: Coping with Workplace Stress" in Sharing. Epilepsy Ontario. Posted 29 November 1999

Is there anything a person can do to deal with his or her stress?

In many cases, the origin of the stress is something that cannot be changed immediately. Therefore, finding ways to help maintain good mental health is essential. There are many ways to be proactive in dealing with stress. In the workplace, a person might try some of the following as suggested by the Canadian Mental Health Association:

- Laughing is one of the easiest and best ways to reduce stress. Share a joke with a co-worker, watch a funny movie at home with some friends, read the comics, and try to see the humour in the situation.
- Learn to relax, take several deep breaths throughout the day, or have regular stretch breaks. Stretching is simple to do anywhere and only takes a few seconds.
- Take charge of the situation by taking 10 minutes at the beginning of each day to priorize and organize your day. Be honest with colleagues, but be constructive and make practical suggestions. Be realistic about what can be changed.



Stretching is a great stress reliever

TIPS FOR BETTER MENTAL HEALTH

1. **Build confidence** Identify your abilities and weaknesses. Accept them, build on them and try your best whenever you can.

2. **Eat right, keep fit** A balanced diet, exercise and rest can help you to reduce stress and enjoy life.

3. **Make time for family and friends** These relationships need to be nurtured; if taken for granted they will not be there to share life's joys and sorrows.

4. **Give and accept support** Friends and family relationships can thrive when they are *put to the test*.

5. **Create a meaningful budget** Financial problems cause stress. Over-spending on our *wants* instead of our *needs* is often the culprit.

6. **Volunteer** Being involved in community can give a sense of purpose and satisfaction.

7. **Manage stress** We all have stressors in our lives but learning how to deal with them when they threaten to overwhelm us will help maintain our mental health.

8. **Find strength in numbers** Sharing a problem with others who have had similar experiences may help you find a solution and will make you feel less isolated.

9. **Identify and deal with moods** We all need to find safe and constructive ways to express our feelings of anger, sadness, joy and fear.

10. **Learn to be at peace with yourself** Get to know who you are, what makes you really happy, and learn to balance what you can and cannot change about yourself.

From: Canadian Mental Health Association

4. Conflict Resolution

Why do people have conflicts?

Conflicts are inevitable. Having different goals and styles can actually promote innovative solutions, creativity, and help bring about change. However negative results happen when conflicts are associated with blame, anger, and grudges. No matter what the source of the conflict is, quick resolution before the situation escalates is essential.

Reminder

Resolve conflicts by focusing on the *problem*, not the *person*.

What can an employer do?

When investigating conflicts in the workplace, be sure to look for root causes especially if conflicts seem to be increasing. For example, Health Canada reports that 2 to 3* times the number of conflicts can arise from stress in the workplace. The root cause – in this case, stress – may be caused by any number of sources.

* From: Health Canada, 2000. "Best Advice on Stress Risk Management in the Workplace"

☑ ENCOURAGE employees to seek constructive resolution for conflicts.

CLARIFY exactly what the issue is.

UNDERSTAND that for most situations, there is an objective (factual) version of events, and a subjective (personal) view.

FIND common ground.

MAKE SURE people know it is okay to disagree at times.

TREAT everyone with respect and professionalism.

LEARN how to listen effectively (give undivided attention, turn off distractions like the radio or television, do not continue to work on the computer, etc.)

MOVE from justification to resolution.

SET clear boundaries.

DO NOT BLAME anyone. Instead, look for opportunities to resolve the situation.

DO NOT DEMAND change. Try to find areas where collaboration or compromise can be made.

What are some ways of informally resolving conflicts?

Employees should be encouraged to seek help when resolving conflicts.

The situation should be brought to the attention of the relevant parties. Employees may wish to try to discuss the situation with the person (people) they are having the conflict with, or they may wish to ask for help from other people. If the issue is not serious or severe, resolution should come from within the employee's department, if possible. If the employee feels uncomfortable raising the issue within their department, they should know where to seek help. Other options may be the Human Resources department, or a designated manager.

Not all situations will require the same option or method of resolution. You may find that one type of strategy works well for certain situations/people, and not in other situations or with certain people. Try to remain flexible and use a variety of strategies including:

Avoiding

In some cases, it may be appropriate to leave a conflict unresolved. In other cases, just leave the conflict unresolved for a *cooling off* period.

Accommodating

Accepting that there is a minor conflict (an *agreeing to disagree* arrangement) can be an important gesture for minor issues. Accommodating on the small issues may help to build trust and respect between those with the conflict.

Confronting

Discussing face-to-face in a respectful and professional manner may also help. Be sure to consider the other person's position and feelings on the issue. Confronting may include explaining why certain decisions were made ("I did not use your idea because…") and, if necessary, a further explanation such as "But unfortunately, the final decision for the project was made by (name) for those reasons"

Collaborating

Like confronting, you discuss the situation directly with the other person. However, you may decide to follow the explanation with an offer to involve the other person in another way. ("But, I was wondering if you had any ideas about… ")

Compromising

With this option, the differences in opinion are discussed. A plan or option is reached together often with both sides agreeing to modify their position.

Communication

Clear communication is essential for good working relationships. Often, subtle differences in verbal and non-verbal communications can change the way a situation is seen and interpreted. The more emotional the situation becomes, the more these cues affect our interpretation of the event(s).

Tips for Effective Verbal Communication

- [x] FOCUS your attention on the other person to let them know you are interested in what they have to say.

LISTEN carefully. Do not interrupt with unsolicited advice or criticism.

BE OBSERVANT. Decide if it is a good time to interrupt, or if you should wait for a more appropriate time to speak.

BE AWARE of how you are delivering your words.

SPEAK slowly, quietly and confidently.

USE common words. Do not use *official* language, jargon, or complex terminology.

ENCOURAGE the person to talk.

REMAIN open minded and objective.

ACKNOWLEDGE the person's feelings. If they appear upset, indicate that you can see they are upset.

TRY to understand. Ask questions like "Help me understand why you are upset." Once you think you understand, repeat it back to the person so they know you understand.

REMAIN CALM if the situation becomes *heated*, and try to gently calm the other person (but do not yell "Calm down!"). Do not allow the other person's anger to become your anger.

Tips for Effective Non-Verbal Behaviour and Communication

☑ USE calm body language. Have a relaxed posture with unclenched hands and an attentive expression.

POSITION yourself at a right angle to the person, rather than directly in front of them.

GIVE the person enough physical space. This varies by culture but normally 2 to 4 feet is considered an adequate distance.

GET on the other person's physical level. If they are seated, try kneeling or bending over rather than standing over them.

☒ DO NOT STAND or SIT in a challenging stance such as:

- Standing directly opposite someone
- Putting your hands on your hips
- Pointing your finger
- Waving your arms
- Crossing your arms

DO NOT GLARE or STARE. It may be perceived as a challenge.

DO NOT MAKE sudden movements. They can be seen as threatening.

More Tips for Problem Solving

TRY to put yourself in the person's shoes so that you can better understand how to solve the problem.

ASK for his or her recommendation.

REPEAT back to the person what you feel he or she is asking or telling you in order to clarify what you are hearing.

ACCEPT criticism in a positive way. When a complaint might be true, use statements like "You are probably right" or "It was my fault". If the criticism seems unwarranted, ask for clarification.

BE HONEST. Do not make false statements or promises you cannot keep.

TAKE the person seriously and be respectful.

BREAK down the problem or issue into smaller units and offer step-by-step solutions so the person is not overwhelmed by the complete situation.

BE REASSURING. Point out or offer choices.

DO NOT TAKE sides.

DO NOT REJECT the person's demands or position from the start. Use a neutral, non-judgmental comment such as "That is an option".

DO NOT MAKE promises you cannot keep.

Mediation

Mediation is a more formal way to reach an understanding of the issue(s). The mediator should be someone who does not have an emotional stake in the outcome. Mediators may be from within the company, or a professional from outside. Resolving conflicts works best when people are calm, and can shift the focus to the *problem* instead of the *people*.

Steps for Mediation

1. Schedule a meeting between the people experiencing the conflict after everyone has calmed down. The cooling down period is essential as it will help disassociate the emotions from the issues. Pick an appropriate time and place where all parties feel they are able to speak openly. Ensure that everyone in the meeting knows that they are invited to help get to the bottom of the problem.
2. Have people take turns explaining their position, issues or feelings. They should not be interrupted while speaking. Have someone take notes. Encourage people to talk by asking questions like "What did you say?" or "What did you do?" rather than simply asking for their version of an event.
3. The note-taker should read back what each person said. Each person should confirm that the notes are accurate.
4. Invite everyone to *brainstorm* for solutions to the problem. Brainstorming does not place blame, nor should it be judgemental about whether an idea is good or bad.
5. Discuss these ideas. Talk about how each idea might work, or how it might not work.

6. Find a solution to the conflict that everyone can accept. This solution may not be anyone's first choice, but it is important that all of the people find it acceptable. If possible, let the people experiencing the conflict decide on a solution. If they cannot agree, then the mediator may have to make a decision. In either case, be clear about expectations and how everyone will know if the solution is working.
7. Put the solution into place for a set period of time (a week or two).
8. Follow-up and schedule a second meeting to make sure that the solution is working. Make any necessary adjustments to the solution if need be.

Lessons learned from follow-up help prevent reoccurrence of similar incidents

5. Harassment

What is harassment?

In general terms, harassment is any action, object or comment that another person finds offensive or harmful or that would be generally viewed by other people as unwelcome or offensive. Harassment usually is something that causes the other person or persons to feel belittled, *put down*, bullied, humiliated, embarrassed, discriminated, intimidated, victimized, or threatened.

The Canadian Human Rights Act protects individuals from harassment on the grounds of race, nationality or ethnic origin, colour, religion, age, sex, sexual orientation, marital status, family status, disability, and pardoned conviction. The Criminal Code covers sexual and physical assaults.

Harassment includes these rights, but in the workplace, it can also cover more areas. The following are some examples, but not a complete list, to help clarify what is meant by *harassment* in a workplace.

Examples of Workplace Harassment can be found on the following page.

Tips for solving harassment issues

Many of the conflict resolution tips in the previous chapter can be used in these situations. Again, clear and open communication is key to solving potential problems. Remember to use positive verbal and non-verbal communication.

☑ ENCOURAGE everyone at the workplace to act towards others in a respectful and professional manner.

HAVE a workplace policy in place that includes a reporting system.

EDUCATE everyone that harassment is a serious matter.

EXAMPLES OF WORKPLACE HARASSMENT

What generally IS considered harassment	What MAY be considered harassment	What generally IS NOT considered harassment
Serious or repeated rude, degrading, or offensive remarks, such as teasing about a person's physical characteristics or appearance, put-downs or insults. Displaying sexist, racist or other offensive pictures, posters, or sending e-mails related to one of the eleven grounds prohibited under the *Canadian Human Rights Act*.	Criticizing an employee in public.	Allocating work. Following-up on work absences. Requiring performance to job standards. Taking disciplinary measures. A *single* or *isolated* incident such as an inappropriate remark or abrupt manner.
Repeatedly singling out an employee for meaningless or dirty jobs that are not part of their normal duties.	Exclusion from group activities or assignments.	Exclusion of individuals for a particular job based on specific occupational requirements necessary to accomplish the safe and efficient performance of the job.
Threats, intimidation or retaliation against an employee, including one who has expressed concerns about perceived unethical or illegal workplace behaviours.	Statements damaging to a person's reputation.	Measures taken against someone who is careless in his or her work, such as in the handling of secret documents.
Unwelcome social invitations, with sexual overtones or flirting, with a subordinate. Unwelcome sexual advances.	Making sexually suggestive remarks. Physical contact such as touching or pinching.	A social relationship welcomed by both individuals. Friendly gestures among co-workers such as a pat on the back.

From: Treasury Board of Canada Secretariat, 2001. "Policy on the Prevention and Resolution of Harassment in the Workplace" with changes.

TRY to WORK OUT solutions before the situation gets serious or *out of control*.

EDUCATE everyone about what is considered harassment, and whom they can go to for help.

TREAT all complaints seriously, and deal with complaints promptly and confidentially.

TRAIN supervisors and managers in how to deal with complaints and potential situations. Encourage them to address situations promptly whether or not a formal complaint has been filed.

HAVE an impartial third party help with the resolution, if necessary.

☒ DO NOT IGNORE any potential problems.

DO NOT DELAY resolution. Act as soon as possible.

If you feel you are being harassed...

☑ FIRMLY tell the harasser that his or her behaviour is not acceptable and ask them to stop. If you have to, excuse yourself and walk away. If necessary, say "I am not comfortable discussing this."

KEEP a factual journal or diary of daily events. Record:
- The date, time and what happened in as much detail as possible
- The names of witnesses.
- The outcome of the event.

Remember, it is not just the character of the incidents, but the number, frequency, and especially the pattern that can reveal harassment.

KEEP copies of any letters, memos, e-mails, faxes, etc. received from the harasser.

REPORT the harassment to the person identified in your workplace policy, your supervisor, or a delegated manager. If your concerns are minimized, proceed to the next level of management.

You may wish to adopt or modify the following policy for your workplace:

Example

HARASSMENT RESOLUTION POLICY

ABC COMPANY

The purpose of this policy is to promote a respectful workplace by the prevention and resolution of harassment.

Harassment at ABC Company is considered to be any action, object or communication that another person finds offensive or harmful or that would be generally viewed by other people as unwelcome or offensive.

Harassment will not be tolerated. Employees who feel they have been harassed may approach their supervisor/manager or delegated manager or union or the human resources department. Employees will not be discriminated against for raising issues or concerns in regards to harassment. ABC Company encourages staff to work together to find solutions to situations before the situation become serious.

Supervisors/managers are encouraged to act on any request in a serious manner, and to find a resolution in a timely manner.

Employees will be informed of this policy through policy manual, and will receive orientation and training from their supervisors.

ABC Company Management

6. Substance Abuse

Why should a workplace look at substance abuse issues?

The fact that some people use substances such as alcohol or illicit drugs, or that some people misuse prescription drugs is not new. The awareness that the abuse of substances may affect the workplace just as the workplace may affect substance abuse is, however, increasing in acceptance. Many aspects of the workplace today require alertness, and accurate and quick reflexes. Impairment to these qualities can cause serious accidents, and interfere with the accuracy and efficiency of work. Other ways that substance abuse can cause problems at work include:

- after-effects of substance use (hangover, withdrawal) affecting job performance
- absenteeism, illness, and/or reduced productivity
- preoccupation with obtaining and using substances while at work, interfering with attention and concentration
- illegal activities at work including selling illicit drugs to other employees
- psychological or stress-related effects due to substance abuse by a family member, friend or co-worker that affects another person's job performance

What will be covered in this section?

This section discusses how substance abuse problems may affect the workplace, possible costs to a business, and how a business can address such issues. It does not discuss reasons why an individual becomes addicted nor addictions in general. For more information, we suggest the following resources*:

Alberta Alcohol and Drug Abuse Commission
http://www.gov.ab.ca/aadac/

Canadian Centre on Substance Abuse
http://www.ccsa.ca/

The Costs of Substance Abuse in Canada
http://www.ccsa.ca/costhigh.htm

Canadian Health Network
http://canadian-health-network.ca/

* We have mentioned these organizations as a means of providing a potentially useful referral. You should contact the organization(s) directly for more information about their information and/or services. Please note that mention of these organizations does not represent a recommendation or endorsement by CCOHS of these organizations over others of which you may be aware.

Definition Of Workplace Substance Abuse

The Canadian Centre on Substance Abuse (CCSA) defines workplace substance abuse as the use of a potentially impairing substance to the point that it adversely affects performance or safety at work, either directly through intoxication or hangover, or indirectly through social or health problems. Generally speaking, substance abuse is considered to occur when a drug is taken without medical reasons, or if a substance impairs or jeopardizes the health or safety of oneself or others. Abuse can occur by using a substance too much, too often, for the wrong reasons, at the wrong time, or at the wrong place.

The range of substances that are abused is wide and can include alcohol, cocaine (including crack), marijuana, other illicit drugs, solvents, and misuse of prescription drugs or over-the-counter medications.

EFFECTS OF VARIOUS TYPES OF SUBSTANCES

Category	Examples	Examples of General Effects
Alcohol	Beer, wine, spirits	Impaired judgement, slowed reflexes, impaired motor function, sleepiness or drowsiness, coma, overdose may be fatal
Cannabis	Marijuana, hashish	Distorted sense of time, impaired memory, impaired coordination
Depressants	Sleeping medicines, sedatives, some tranquilizers	Inattention, slowed reflexes, depression, impaired balance, drowsiness, coma, overdose may be fatal
Nicotine	Cigarettes, chewing tobacco, snuff	Initial stimulant, later depressant effects

Category	Examples	Examples of General Effects
Hallucinogens	LSD (lysergic acid diethylamide) PCP (phencyclidine), mescaline	Inattention, sensory illusions, hallucinations, disorientation, psychosis
Inhalants	Hydrocarbons, solvents, gasoline	Intoxication similar to alcohol, dizziness, headache
Opiates	Morphine, heroin, codeine, some prescription pain medications	Loss of interest, "nodding", overdose may be fatal. If used by injection, the sharing of needles may spread Hepatitis B, or C and HIV/AIDS.
Stimulants	Cocaine, amphetamines	Elevated mood, overactivity, tension/anxiety, rapid heartbeat, constriction of blood vessels

Source: Blume, S.B., *Alcohol and Drug Abuse* in the ILO Encyclopaedia of Occupational Health and Safety 4th edition, International Labour Office, 1998

Costs to a Business

The economic impacts of substance abuse in Canada to businesses or industry have been traditionally difficult to measure. Many costs are hidden by general absenteeism or illnesses, *unnoticed* lack of productivity, or inability or reluctance to link substance abuse directly with causes of accidents.

In general, the Canadian Centre on Substance Abuse (CCSA), reports that substance abuse cost the Canadian economy more than $18.4 billion in 1992. This means it cost $649 per person, or about 2.7% of the total Gross Domestic Product. Along with the costs for alcohol (about $7.5 billion), this figure includes the costs for tobacco (over $9.5 billion) and illegal drugs ($1.4 billion). CCSA also states that the largest economic costs of substance abuse are for:

- people missing work because of accidents,
- disease,
- people dying,
- direct health care, and
- police and other types of law enforcement.

As such, costs to a business may be both direct and indirect. The impact of substance abuse that have been reported often focus on four major issues:

- premature death/fatal accidents
- injuries/accident rates
- absenteeism/extra sick leave, and
- loss of production.

Additional costs can include:

- tardiness/sleeping on the job
- theft
- poor decision making
- loss of efficiency

- lower morale of co-workers
- increased likelihood of having trouble with co-workers/supervisors or tasks
- higher turnover
- training of new employees
- disciplinary procedures
- drug testing programs
- medical/rehabilitation/employee assistance programs

Does work contribute to substance abuse?

While there may be commonalities in the occupations of people who abuse substances, the fact that a job has certain characteristics does not mean that the employee will begin to use substances. Various and numerous personal and social factors can play a major role. In general, however, some work-related factors can include:

- high stress,
- low job satisfaction,
- long hours or irregular shifts,
- fatigue,
- repetitious duties,
- periods of inactivity or boredom,
- isolation,
- remote or irregular supervision and,
- easy access to substances.

What can the workplace do?

Work can be an important place to address substance abuse issues. Employers and employees can collaborate to design policies which outline what is an acceptable code of behaviour and what is not. By establishing or promoting programs such as an Employee Assistance Program (EAP), employers can help troubled employees more directly or provide referrals to community services.

Workplaces are encouraged to establish a procedure or policy so that help can be provided in a professional and consistent manner. It is important for supervisors and managers to have a resource or procedure to rely on if the need arises. Employees need to know that everyone will be treated consistently and fairly. Pre-planning, as for many other occupational health and safety issues, is the best way to avoid confusion and frustration. In addition, managers and supervisors should be educated in how to recognize and deal with substance abuse issues and employees should be offered educational programs.

What elements should be in a substance abuse policy?

A company substance abuse policy should emphasize that the program is confidential and be jointly created by both labour and management.

Elements of the policy would include:

- purpose and objectives of the program
- definition of substance abuse
- who is covered by the policy and/or program
- employee's rights to confidentiality
- employee education (e.g., a substance-free awareness program)
- training for employees, supervisors, and others in identifying impaired behaviour and substance abuse.
- provision for assisting chronic substance abusers
- how to deal with impaired workers
- if necessary, under what circumstances drug or alcohol testing will be conducted.

7. Work / Life Balance

Have you heard people say this before?

I like my job. I have wonderful kids and a supportive spouse but even so I feel I am stretched to the limit and that I never have enough hours in the day to get my work done and still have time for family let alone friends or the things I really want to do.

They are not alone. Several studies have found high levels of stress are often associated with conflicting demands of work and home. One survey showed that even though job satisfaction may be high, a majority of workers rate balancing work and family as more important that any other employment factors. Health Canada (1998) states that one of the greatest challenges to balancing work and home life is job demands. Job demands include time pressures and deadlines, long hours, unclear or conflicting duties, having too much responsibility, or work that is too tiring or boring.

Work/life balance initiatives can help to bridge the gap between work and home responsibilities.

What are work / life balance initiatives?

Simply put, work/life balance initiatives are any benefits, policies, or programs that help create a better balance between the demands of the job and the healthy management (and enjoyment) of life outside work.

Work/life initiatives can potentially deal with a wide range of issues including:

- on-site child care,
- emergency child care assistance,
- seasonal child care programs (such as March break or Christmas),

- elder care initiatives (may range from referral program, elder care assessment, case management, a list of local organizations or business that can help with information or products, or seminars and support groups)
- referral program to care services, local organizations, etc.,
- flexible working arrangements
- parental leave for adoptive parents,
- family leave policies,
- other leaves of absence policies such as educational leave, community service leaves, self funded leave or sabbaticals,
- employee assistance programs
- on-site seminars and workshops (on such topics as stress, nutrition, smoking, communication, etc.),
- internal and/or external educational or training opportunities, or
- fitness facilities, or fitness membership assistance (financial).

Why should a workplace consider these programs?

The need for balance is essential. As stated by Human Resources Development Canada (HRDC) on their "Work / Life Balance in Canadian Workplaces" web site:

> When employees are *out of balance*, they experience more stress and fatigue and tend to be absent from work more often due to these reasons. They have less focus while at work because they are worried about issues at home and they are also more distracted at home because work matters weigh on their minds. The end result is that neither situation is healthy or productive; in short, it's a lose/lose situation for employees, their families and their employer.

Studies on work/life balance programs have reported such benefits as:

- Attract new employees
- Help to retain staff
- Build diversity in skills and personnel
- Improve morale
- Reduce sickness and absenteeism
- Enhance working relationships between colleagues
- Encourage employees to show more initiative and teamwork
- Increase levels of production and satisfaction
- Decrease stress and burn-out

How does a workplace implement work/life balance initiatives?

Work/life balance initiatives can be part of a complete health and safety and/or a health promotion program in the workplace. The initiatives can be written as part of existing health and safety policy, or particular guidelines can be referenced in the overall company human resources policy or the collective agreement (if applicable).

Meeting both the employees' and overall business needs requires a significant commitment from senior management. Each workplace should tailor its work/ life policies to suit its own particular needs and corporate culture. This *best fit* results from frequent consultation with employees. As with other programs, for work/life initiatives to be successful and sustainable, both employers and employees must take responsibility for making the program work effectively. An evaluation or feedback system should also be part of that process.

What are some steps to take when setting up a program?

When starting, it is best to appoint an individual or in some cases, form a joint work/life balance committee. To research needs and to implement the program, suggested steps to take are as follows:

1. Assess the workplace's current situation and objectives.
   - Survey employees, supervisors, and managers.
   - Ask about needs, concerns, etc. Find out about bottom line or underlying concerns (e.g., employees report not being able to cope with workplace stress. What is the true source of this stress?)
2. Get buy-in from all levels.
   - Educate all members of the company about the benefits and challenges of introducing these programs.
   - Be clear on the intentions and goals of the program.
   - Provide any necessary training and/or education to help address concerns.

   Some common concerns or challenges that may need to be addressed include the misconceptions that:
   - people should keep their personal lives at home
   - being present equals being productive/ hours at work equals performance/results
   - benefit programs can make people happier, but not more productive
   - family-friendly policies are soft human resources issues, mainly for women
   - management will lose control
   - it's only for non-managerial positions
   - one program is good for everyone
   - participation will be a career-limiting move.

3. Be clear how hours, productivity and deadlines will be monitored.
    - Address fears and apprehension expressed by both employees and managers.
    - Be sure that workload issues are resolved and set realistic targets.
4. Create a policy or guideline:
    - Clearly state its use and purpose
    - Be clear about the impact on vacation time, compensation and other benefits, if any.
5. Initiate a trial period and/or pilot studies.
6. Monitor, re-survey, and make any adjustments that are necessary.
    - Act on recommendations for modification or for further enhancements.

Regular meetings help keep everyone up-to-date on progress and intentions

8. Flexible Work Arrangements

What is meant by "flexible work"?

Simply put, flexible work arrangements are alternate arrangements or schedules from the traditional working day and week. Employees may choose to work an alternate schedule to meet personal or family needs. Alternatively, employers may initiate various schedules to meet their customer needs.

Why should a business consider offering flexible work arrangements?

Many benefits have been reported by various studies. Common findings include:

- Increased ability to attract, retain and motivate high-performing and experienced employees
- Reduced absenteeism
- Assists employees in managing their responsibilities outside of work
- Increased job satisfaction, energy, creativity, and ability to handle stress
- Removes barriers to employees' maintaining a healthy lifestyle

Designing a Flexible Work Policy

No matter which program or how many options are available, duties, expectations, and deadlines should be clearly outlined by the supervisor and agreed upon by both the supervisor and the employee. Supportive organizational culture, clear communication, teamwork and reciprocal support between management and employees will help ensure the success of these initiatives.

Other issues that should be considered include:

- Initial start-up costs, and additional administrative duties/time.
- How to schedule meetings and training courses so most employees can attend.
- Workload management.
- Meeting customer demands.
- Impact the employee's absence will have on the group or the organization.
- Impact on terms and conditions of employment (e.g., leave benefits may be pro-rated).

Examples of Flexible Work Arrangements

Whether formally written into company policy or an informal agreement between the employee and employer, common arrangements include:

Flex time

Flex time is an arrangement where employees work a full day but they can vary their working hours. These arrangements are usually established with specific guidelines so that a *core* working day exists. Flex time is usually arranged in advance with the employee and employer or supervisor and a set range of start and finish times are established. The total hours of work are not usually affected by this arrangement.

For example, the employee may choose to start between 7:30 and 9:30 AM, and finish between 3:30 and 5:30 PM. This arrangement establishes that core hours are between 9:30 AM and 3:30 PM when all employees will be at work. It is usually mandatory for an employee to take a lunch break (rather than work through lunch and leave work early) but the time allowed for lunch can also be flexible. Employees should maintain their start/finish times so that a routine is established and co-workers can become accustomed to each other's schedule.

Reduced hours/Part-time

Employees may choose to work fewer than the standard 37.5 or 40 hours workweek. These arrangements may be on a temporary or permanent basis depending on individual circumstances. It may also be considered in some cases for employees with health problems or disabilities. Work hours may be negotiated, or they may be chosen to coincide with peak workload hours depending on the type of business. However, employee benefits and qualification for government programs (such as employment insurance or pension plans) may be affected, and should be examined thoroughly before commencing.

Compressed work week

Compressed workweek occurs when an employee works for longer periods of time per day or shift in exchange for a day off. Employees may start earlier or finish later that the normal work day. The employee often initiates compressed workweeks, but sometimes the employer may initiate the option to improve operational efficiency, to maximize production (reduced daily start up costs) or to establish longer business hours which can enhance customer service.

Common arrangements for a 40 hours work week are working 10 hours per day, 4 days a week; working an extra hour a day with 1 day off every 2 weeks; or working an extra 15 or 20 minutes a day and having one day every 3 or 4 weeks off.

Telework / Telecommuting

Telework or telecommuting occurs when people to do at least some of their regular work from home instead of going into the office. Outline details such as hours of work, and how communications between the teleworker, co-workers and customer will occur. For more information, please see the chapter on Telework / Telecommuting in this guide.

Job Sharing

Job sharing occurs when two or more people share one or more positions or set of duties. It should be clear before starting how these arrangements affect pay, benefits, and holidays. Those in a job sharing arrangement need to work effectively as a team, and communicate well. Job sharing may be an option when few part-time positions are available within the company.

Banking of Hours / Annualized hours

This arrangement allows employees to choose, within negotiated boundaries, their days and hours of work to the maximum for a set period of time. This period of time may be weekly, monthly or yearly. Such arrangements are often a combination of flextime and compressed workweek and can help reduce the amount of overtime hours required. These arrangements may be suited to fields where there is variation in demands such as peak hours or seasonal peaks.

Gradual Retirement

Gradual retirement allows employees to reduce their working hours or reduce their workload over a period of time rather than switching from full time employment to retirement abruptly. This phased period can be used to train the replacement employee, help others adjust to restructuring within the company, or to adjust for the redistribution of tasks among the remaining employees.

Leaves and Sabbaticals

Leaves and sabbaticals are authorized periods of time away from work without loss of employment rights. Paid or unpaid leaves are usually granted for family, health care, education or leisure reasons. Sabbaticals are usually paid (or partially funded) and occur on a regular basis in addition to vacation time. In some cases, self-funded leaves are also possible where a portion of the employee's salary is withheld and returned to the employee 'as pay' during the time away from work.

9. Telework / Telecommuting

It is becoming more and more common for people to perform at least some of their regular work from home instead of going into the office. Technology has made it possible for a worker be connected to the office by telephone, computer, modem, fax or e-mail. Since teleworking can involve a number of workplace health, safety and wellness concerns (beyond simply *bringing work home*), it is examined in detail in this section.

Issues Surrounding A Telework Arrangement

From a health and safety viewpoint, employers and employees should consider some important issues when agreeing to a telework arrangement. These include:

- workstation design and arrangement (ergonomics)
- work scheduling and distribution
- working alone
- workers compensation and occupational health and safety laws

Tips For Work Scheduling (Work Load) Issues

Duties, expectations, and deadlines should be clearly outlined and agreed upon by both the supervisor and the teleworker.

Be careful not to *over work*. There are natural breaks in an office environment that will not occur at home. Discussions with co-workers or a quick walk to the printer offer opportunities for a change in body position that may be missing in a home office. Extended hours in the same body position or repeated motions can lead to various musculoskeletal injuries.

TELEWORKING ADVANTAGES vs DISADVANTAGES

	Advantages	Disadvantages
Individual	Less distractions from co-workers More flexibility with organization of daily tasks (better personal time management) Savings in time and commuting costs Higher job satisfaction	Isolation Lack of separation between home and work More distractions from family Potential for excessive work hours Less awareness of changes in company Fear of being undermanaged or 'out of sight, out of mind'
Company	Improved employee retention Often higher productivity Less lost hours due to traffic problems Reduced absenteeism Savings in energy, office space requirements, maintenance and housekeeping Increases number of potential candidates for a job	Contacting employee Maintaining adequate communication between supervisor, other employees or with customers Possible delay in customer service

Ergonomic Tips For Setting Up A Home Office

A home office should meet the same health and safety standards as those available at work. Make sure that:

- your desk, chair and other accessories are of a comparable (equal) quality to that in the office. For example: the desk should be an appropriate height and sturdy enough to handle the weight of any equipment that you may place on it (e.g., computers, printers, fax machines, scanners, etc.)
- your workstation is adjusted properly: the keyboard is at the right height (wrists are in a neutral position). The kitchen table is not an ideal work surface as the table is too high and doesn't allow for proper positioning of the wrists in relation to the keyboard.
- lighting is properly arranged: there should not be reflections on or glare from the computer monitor.

Are there any safety or security issues to working at home?

A home office should offer the same level of safety and security that the regular work office would provide. An employee working at home is usually alone. While working alone in itself is not a risk, it can present a unique situation should something unexpected happen. It is important to keep to a contact schedule even if there are not work details to discuss.

What is an appropriate home office environment?

An appropriate work space at home may include:

- a space or room where it is easy to concentrate – preferably separate from other living areas and away from the television,
- level of security as required by the workplace,
- necessary telephone lines (separate from family line if required) and answering machine or voice mail,

- telephone line or cable for e-mail and Internet connections, if necessary, and
- control over temperature, light and sound

Household members who will understand you are working and will not disturb you unnecessarily are also important.

A sample Home Office Safety Checklist can be found on the following page.

Tips for the Employee who is working at Home

While you may not have to drive to get to work that day, it is still important to keep to a 'work day ritual'. Some tips for working at home include:

☑ HAVE a specific location where you work. This may be a room, or just a corner of a room, but it is always the place where you do your work.

BEGIN and FINISH at the same time every day you are working at home. Have a beginning and end of day ritual. Since there is no longer a break between waking up and going to work, some teleworkers find it helpful to actually leave the house and walk around the block before starting work. You may want to end the day the same way.

SET a schedule and stick to it, just as you would for working in the office. Make a *to do list* and check your accomplishments at the end of the day. Stick to deadlines.

MAINTAIN contact with the office. Establish a routine for contact with your supervisor, or co-workers. Keep your supervisor informed of your progress and any difficulties encountered. This contact includes the need for overtime to complete projects.

ATTEND meetings and gatherings at work as often as possible. This interaction helps keep you from becoming *invisible*.

Sample

HOME OFFICE SAFETY CHECKLIST

	Yes	No	Items for Consideration
Fire Protection	❑	❑	Is there a smoke alarm?
	❑	❑	Is there clear access to a fire extinguisher?
	❑	❑	Is there a carbon monoxide detector in areas where there are fuel-burning appliances?
Emergency Procedures	❑	❑	Has an evacuation plan been established?
	❑	❑	Are the first aid supplies adequate?
	❑	❑	Are emergency contact numbers posted near the telephone?
	❑	❑	Has a periodic contact schedule been established?
	❑	❑	Does your office contact know how to reach someone near you in the event of an emergency?
Electrical Safety	❑	❑	Are extension cords in good condition and positioned properly?
	❑	❑	Are cords and cables causing a tripping hazard?
	❑	❑	Are outlets grounded and not overloaded?
	❑	❑	Is there surge protection for electrical equipment?
	❑	❑	Is there sufficient ventilation for electrical equipment?

Notes

DETERMINE what interruptions are acceptable. Establish ground rules with friends and family.

BE HONEST with yourself. Teleworking is not a substitute for child or elder care, nor is it a way to simply save money on commuting costs. Too much compromise on the part of the employee or employer can lead to problems and possible failure to meet the terms of the teleworking agreement.

Issues About Telework Arrangements

One of the most important questions to answer is who will be responsible for health and safety issues and worker's compensation if the teleworker is injured. To avoid complications, there should be a written agreement between the employer and the teleworker clarifying these matters. Teleworkers should not be subjected to reduced health and safety standards at home. Other important health and safety issues include:

- Establishing if the employer or the health and safety committee have access to the house for safety inspections. Or, will alternative arrangements be made such as the worker using checklists or submitting photos of the work area.
- Determining what parts of the house will be considered the 'workplace'? Are the bathroom and/or kitchen included?
- Establishing that teleworkers must immediately report any accident or injury to their supervisor (just as they would at the office).
- Determining how will accidents or injuries be investigated.

This agreement should also outline:

- Who buys and maintains the equipment such as the desk, chair, computer (including software and updates), fax, general office supplies, etc.
- If remote access to the company's main computer systems is available outside of the office. If possible, how and what type of software or equipment is necessary.

- What expenses will be reimbursed (dedicated telephone lines, Internet access, business telephone calls, office supplies)?
- What hours the employee will be available?
- How overtime will be approved?
- When and how often the employee will check for messages?
- If the primary contact method will be telephone or e-mail?
- What number to call to reach employee at home. Is there an alternative number?
- Who will have access to home-office phone number?
- Listing of work assignments, due dates, work expectations, etc.

Do occupational health and safety laws in Canada cover teleworking arrangements?

Since teleworking is relatively new, it is not clear how occupational health and safety or compensation laws cover this subject. In addition, these laws are different in each jurisdiction. It is important to contact your local government department responsible for occupational health and safety to find out what laws apply to your situation. A list of phone numbers and addresses for these departments is available in Section V of this guide. You may also want to check with your union, other labour contracts, or your Joint Health and Safety Committee or member as well as company policies.

Checklist for Teleworking Arrangements

A checklist for a teleworking policy can be found on the following page.

Sample

TELEWORK ARRANGEMENTS CHECKLIST

Yes	No	Items for Consideration
❑	❑	Is there a statement that outlines what types of jobs or tasks may be done at home, or will each application be handled on a case-by-case basis?
❑	❑	Is there a statement that indicates that except where outlined in the teleworking policy that the employees regular conditions of employment remain the same?
❑	❑	Have arrangements been made for normal supervision of the employee to continue (including frequency of contact between employee and supervisor, ongoing feedback, performance appraisals and career development)?
❑	❑	Has the exact location (full street address) that the employee will be working from been recorded?
❑	❑	Does home office violate municipal zoning regulations?
❑	❑	Is there a statement that the employee will follow all of the company health and safety policies when establishing and working in a home office area?
❑	❑	Will business meetings be held at the employee s residence or at the regular office exclusively? If meetings may be held in the home office, a statement that the employee will keep the home office area safe for themselves and others who may enter it may be necessary.
❑	❑	Have the details about how communications between the teleworker, co-workers and customers been outlined?
❑	❑	Is there an agreement about travel time and mileage allowance, if any, between the employee s home and the regular work location? What arrangements are needed if the employee is sent away from the home location on work business (but not to report to the office)?
❑	❑	Is there agreement on how the workload will be assigned? How will overtime be approved?
❑	❑	Is there a need for company (proprietary) information to be stored in a locked room, desk or file cabinet?

Evaluating the Telework Arrangement

In most cases, a telework arrangement should be offered on a trial basis for a specified period of time. The policy should clearly state what criteria would be used to evaluate the arrangement. Evaluation may include the following items:

- meeting deadlines,
- overall and/or employee productivity,
- progress of individual or team assignments
- availability to receive and return calls,
- impacts on the employee at home as well as other staff in the office,
- customer service delivery, and/or
- the ability to attend meetings, even on short notice

In some cases, only changes to the telework arrangement may be necessary, while in others the arrangement may be ended. Keep management, supervisors, and staff up-to-date of any changes to the overall policy.

Section IV

Healthy Choices

1. Healthy Eating
2. Active Living

Healthy Choices

Together – healthy eating and active living – combined with a positive outlook can lead to:

- Reduced risk of heart disease and some forms of cancer.
- Elevated mood, energy and self-esteem.
- Reduced anxiety and stress.
- Opportunities to spend enjoyable time with family and friends.

From: Health Canada, Office of Nutrition Policy and Promotion, 2001 "Vitality"

An employers' responsibility to provide a safe and healthy workplace is greater than their responsibility to encourage healthy lifestyles among their employees. However, when asked, employees often say they want to improve their health habits. These programs can serve as a means to gather interest in a workplace health and wellness program, will draw good participation, as well as be the main *ingredients* for a healthier life both at work and at home. These programs can also serve as a common ground, helping to bring different groups together. As always, these programs should be part of a complete workplace health program and it should not take away resources or distract attention from other workplace hazards that may be present.

Before you start

No matter how well planned or promoted, these programs should be voluntary and not everyone will join or be interested. Your workplace health and wellness survey or employee needs assessment should guide you as to what types and levels of programs to offer.

1. Healthy Eating

Focus of a Nutrition Program

Workplaces that wish to initiate a nutrition education program should focus on the main messages from the *Canada's Food Guide to Healthy Eating*, and target food services operations (vending machines, canteens, cafeterias and restaurants) to offer healthier food choices.

When planning your program, you may wish to refer to the notes in Section I. While these notes make references about how to establish an *overall* workplace health and wellness program, the same tips and suggestions apply for each activity under the overall program. In this case:

☑ KNOW why people are interested in a healthy eating program. Are participants looking for general nutrition information, or more specific programs such as heart health?

BE SURE to consider what types of programs have been offered in the past (Which programs worked? Which did not?)

KNOW who your target audience is.

PLAN when will the program be offered (seasonal, or all year)

STATE who people can go to if they have individual questions or want more help.

Plan for the evaluation and monitoring of the program

Be sure the workplace supports healthy eating programs by providing time to attend information sessions, appropriate foods in the cafeteria and vending machines, or by equipping the lunchroom with refrigerators and microwaves so that meals can be stored and prepared appropriately.

When offering nutrition information at the workplace, be sure to offer a wide range of options. Topics for programs may include:

- Understanding the Basics
- Weight management and body image
- Fad diets
- Fats and Cholesterol
- Salt reduction
- Planning balanced meals for the entire family
- Aging well
- Grocery shopping and reading nutrition labels
- Programs for specific health conditions (diabetes, heart conditions, etc.)
- Healthy eating on the run
- Vegetarian eating

Keep in mind that when deciding what to eat, people often use the following:

- Taste
- Nutrition and health
- Ease of preparation
- Preparation time
- Price
- Weight control or dieting

Examples of more specific program options include:

- Provide material for employees to take home to help them make healthier choices when planning meals. For example:
  - Provide a sample shopping list and a plan for the week's meals you can make from that list.
  - Have handouts of *Canada's Food Guide to Healthy Eating* (the *Rainbow* or *bar* charts).

- Provide information about how to make healthier food choices when shopping, ordering in restaurants, etc.
- Teach people how to read and understand food labels.
- Provide cooking demonstrations, or cooking tips, for better food preparation.
- Post a list of local restaurants that offer balanced food menus.
- Invite a speaker to a 'lunch-n-learn' session.
- Have promotional or theme weeks or months.
- Arrange for the cafeteria to offer a range of food choices for every meal.
- Provide a refrigerator and microwave so people can bring healthy lunches from home.
- When lunches or drinks are provided at meetings, be sure to provide healthy choices.
- Arrange for a group to go to a weight management program together, or have the program come to your office at a convenient time.
- Give people a forum (Intranet, e-mail, posters) for a "healthy recipes exchange".
- Provide information about how to substitute low-fat ingredients in favourite recipes.
- Organize a potluck lunch at work featuring healthy food choices.
- Offer appropriate incentives, if people are interested.
- Offer a new tip or goal for each week. Examples include:
  - I will eat 5 fruits or vegetables each day.
  - I will eat breakfast every morning.
  - I will have an extra piece of fruit every day.

Reminder

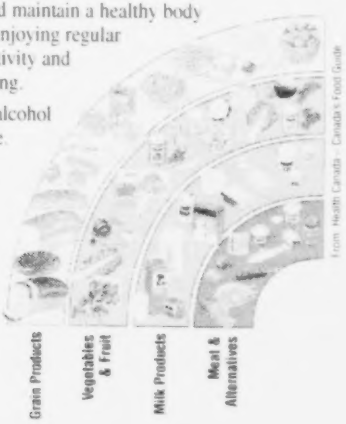
Always remember how the workplace environment influences the health of the employees.

For example, if a nutrition program is offered, remember to look at where the employees eat their lunch (a safe and clean eating area is a requirement under most occupational health and safety laws) as well as the contents of the vending machine. If the way the workplace itself influences the eating patterns of the employees is not addressed, the program will often have little impact.

Information about Health Eating

Canada's Guidelines for Healthy Eating include the following tips:

- Enjoy a variety of foods.
- Emphasize cereals, breads, other grain products, vegetables and fruits.
- Choose low-fat dairy products, lean meats, and food prepared with little or no fat.
- Achieve and maintain a healthy body weight by enjoying regular physical activity and healthy eating.
- Limit salt, alcohol and caffeine.



TIPS FOR HEALTHY EATING

Tips	Why?	How?	Examples
Go for whole grains	Whenever you can, choose whole grains such as whole wheat, wheat bran, oatmeal, barley and bulghur. Grain products give you energy for your busy day and the fibre in them help to keep you regular!	Start your day with a bowl of whole grain cereal Make sandwiches on whole grain bread or rolls Add barley or brown rice to soups and stews Substitute bran or whole grain flour for part of the white flour when baking Snack on whole grain crackers	Fill up your plate with 5-12 servings of grain products every day. A serving is: – 1 slice of bread – 1/2 bagel – 3/4 cup or 175 mL hot cereal – 30 grams of cold cereal – 1/2 cup or 125 mL rice or pasta
Take a bite from vegetables and fruit	Dark green and orange vegetables and orange fruit are the best – they're packed with nutrients and fibre!	Eat a variety or vegetables and fruit every day: – Try a new vegetable or fruit this month – sprinkle some berries over cereal – Pack a few pieces of fruit with lunch	Reach for 5-10 servings of vegetables and fruit every day. A serving is: – 1 medium size piece – 1/2 cup or 125 mL (fresh, frozen or canned) – 1/2 cup or 125 mL juice – 1 cup or 250 mL salad

Tips	Why?	How?	Examples
Make your day with milk products	Milk products provide a generous source of calcium!	Here are some ways to include milk products every day: – Drink and eat your milk too add it to soups, puddings or home baked goods – Make a dip with yogurt – Add cottage cheese to lasagna	Aim for 2-4 servings of milk products every day. A serving is: – 1 cup or 250 mL of milk – 2 slices or 50g of cheese – 3/4 cup or 175 mL of yogurt
Pick a lean protein	Meat and meat alternatives can be great for protein, iron and other nutrients. Meat, poultry, fish and seafood can be cooked and prepared in many different ways. Try beans, dried peas, lentils, eggs, peanut butter, and tofu for added variety to your meals.	For lean protein choices: – Bake, broil, barbeque, or stir fry meat instead of deep frying – Try a meatless meal this week such as lentils and rice, quiche or omelette, bean salad with pita bread, or tofu burgers	Enjoy 2-3 servings every day. A serving is: – 50-100 grams meat, poultry, or fish – 1/3 – 2/3 can or 50-100 grams canned fish – 1/2 – 1 cup or 100 grams of tofu – 2 Tbsp or 30 mL peanut butter

Tips	Why?	How?	Examples
Go easy on added fats	While fats and oils can add flavour to foods, try to use as little as possible.	Here's how: – Try the lower fat versions of salad dressing and mayonnaise – Add a splash of herbed or flavoured vinegar to salads – Try mustard, chutney or salsa on sandwiches – Use more herbs and spices to season your food	There are no recommended number of servings for fats and oils. Use them in moderation to add taste and enjoyment to your food.

Notes

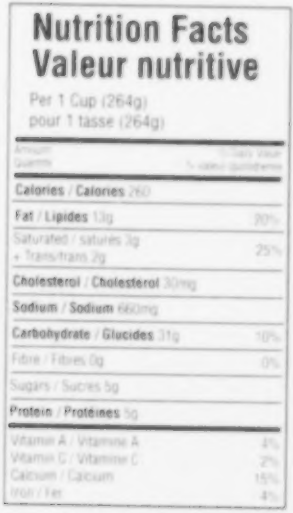
From the Dietitians of Canada "5 Tips for Healthy Eating" as viewed on January 17, 2002
http://www.dietitians.ca/english/factsheets/e1998_01.html

Reading Nutrition Labels

Reading the nutrition label is a very useful tool to use to choose foods for healthy eating. The label provides information about the content of the food as sold, not as they might be prepared.

Remember:

- Read the entire label – products that may be high in fibre or low in fat may also be high in sugars.
- While it is recommended that nutrients such as fat and sodium be limited, they are still essential for the body to function normally and should be included in the proper proportions in daily meal planning.
- While labels are helpful, they should not be the only factor used to determine what to eat. Don't forget to enjoy a variety of foods.



A Sample Nutrition Label

The Label

Contents Information is given on a set list of nutrients. It is in a standardized format and is consistent from product to product.

Serving Size Check how much of the product is considered a "serving".

% Daily Value If a food has 5% or less of a nutrient, it is considered to be low in that nutrient. A food is considered a good source of a nutrient if the percentage is between 10% and 19%. If the food has more than 20% of the daily value, it is considered high in that nutrient. These figures presented are based on an intake of 2000 calorie per day.

Fat Use the "% Daily Value" figure to help determine if this product will help to limit your fat intake to less than 30% for the day. Try to limit the amount of saturated fat (fat that is solid at room temperatures).

Carbohydrates Carbohydrates are either simple (called sugars) or complex (called starches). Look for products that are high in fibres while low in sugars.

Health Claims (made on labels and packaging)

A nutrition claim highlights a nutritional feature of a product. It has been known to influence people's buying habits. Since a nutrition claim must always be backed up by detailed facts relating to the claim, look for the nutrition label for more information.

NUTRITION CLAIMS

Claim	Description
Fat Free	Less than 1/2 gram fat per serving.
Low Fat	3 grams fat or less per serving.
Reduced-Fat	At least 25 percent less fat when compared with similar foods.
(X) Percent Fat-Free	The percentage is based on the amount of fat (by weight) in 100 grams of food. Example: If 50 grams of food contain 2 1/2 grams of fat, the food can be labelled "95 percent fat-free."
Saturated Fat-Free	2 grams or less saturated fat per serving and no more than 15 percent of calories from saturated fat.
Reduced Saturated Fat	At least 25 percent less fat per serving when compared to a similar food.

From: Lambton Health Unit. *Reading Nutrition Labels – What's In It For Me?* (Viewed on November 26, 2001) http://www.lambtonhealth.on.ca/nutrition/readlabels.asp

Healthy Food Choices for Busy People

The following food choices are great for people on the go... keep them in your desk, the lunchroom fridge or in the car. Be careful and to watch for refrigeration requirements and expiration dates!

HEALTHY SNACKS

Store in Your Desk or Locker	Store in the Lunchroom Fridge	On the Road?
Crackers	Bagels/Bread	Baby carrots
Dried/Canned Fruit	Bran muffins	Celery sticks
Juice box	Yogurt	Bagel bits
Rice cakes	Cottage cheese	Rice cakes
Granola bars	Fresh fruit	Apples
Instant soups/pastas	Raw vegetables	Crackers
Peanut butter	Cheese	Pretzels
	Milk	
	Salad greens	

Different (or "Difficult") Eating Situations

The chart on the following page provides food choices for when you find yourself eating outside of *normal circumstances* (i.e., attending conferences or meetings, working long hours, on the road, etc.).

DIFFERENT / DIFFICULT EATING SITUATIONS

Situation	Try to Limit	Try Instead
Meetings	Donuts Large muffins Cookies Tea and coffee with cream	Small muffins Bagels Scones Tea Biscuits Fresh fruit Juices/Water Milk
Vending Machines/ Catering Trucks	Danish Chocolate Bars French Fries Pop Chips	Juices/Water Pretzels Sandwiches Milk Soup Fruit Cereal boxes Yogurt Whole grain breads
Hectic Schedule/ Long Hours	Chips Cookies Coffee with cream Hot dogs Pizza with double cheese and pepperoni	Fresh fruit Muffins Vegetable sticks Salads with lower-fat dressing Lean sliced meats Milk Yogurt
On the Road	Chips Fried Foods Large burgers Salads loaded with dressing	Small plain burgers Bagels Cereal bars Crackers and cheese Juice/Water Turkey sandwiches Pizza with ham and vegetables

From the Dietitians of Canada "Nutrition to Go! Away from Home." (Viewed on January 18, 2002) http://www.dietitians.ca/english/factsheets/onthego.html

Nutritional Concerns for Specific Job Requirements

"Heavy Physical Activity" Jobs

Most jobs today do not require the employee to eat any additional calories to compensate for physical activity at work. The exception may be very physical work such as people who lift or carry heavy loads most of the day (such as shovelling, sawing trees by hand, etc.). If you have concerns about meeting your nutritional needs, ask a dietitian or your family doctor for advice.

Salt and Fluid Supplements

A person working in a very hot environment loses water and salt through sweat. This loss should be compensated by water and salt intake. Fluid intake should equal fluid loss. On average, about one litre of water each hour may be required to replace the fluid loss. Plenty of cool (10-15 °C) drinking water should be available on the job site and workers should be encouraged to drink water every 15 to 20 minutes even if they do not feel thirsty. Drinks specially designed to replace body fluids and electrolytes may be taken. Alcoholic drinks should NEVER be taken as alcohol dehydrates the body.

An acclimatized worker loses relatively little salt in their sweat and, therefore, the salt in the normal diet is usually sufficient to maintain the electrolyte balance in the body fluids. For unacclimatized workers who may sweat continuously and repeatedly, additional salt in the food may be used. Salt tablets are not recommended because the salt does not enter the body system as fast as water or other fluids. Too much salt can cause higher body temperatures, increased thirst and nausea. Workers on salt-restricted diets should discuss the need for supplementary salt with their doctor.

2. Active Living

Active living is not the same as an exercise program. Active living means making physical activity a part of every day life whether you are taking the stairs instead of the elevator, gardening, taking the kids to the park or dog for a walk, walking to the other building at your facility, or swimming laps in the pool.

Active living at work is about integrating physical activity into our daily work lives. The overall goals of a successful program at work will:

- Encourage employees at any fitness level to be more active and to stay active.
- Provide information about the health benefits of being active.
- Provide strategies for incorporating active living into daily routines.
- Provide opportunities for being active to, from and/or at work.
- Will recognize employees for their efforts.

For the individual, the overall goal of active living is to:

- Value and practice activities that are at a moderate level and fun
- Be active your way, every day
- Participate for the joy of feeling your body move

As before, when planning the program, you may wish to refer to the notes in Section I. While these notes make references about how to establish an "overall" workplace health and wellness program, the same tips and suggestions apply for each activity under the overall program. In this case:

- Know why people are interested in active living. Do participants want to "get into shape" or are they interested in better fitness as a way to improve their heart health?

- Be sure to consider what types of programs have been offered in the past (Which programs worked? Which did not?).
- Know who your target audience is.
- Plan when will the program be offered (seasonal, or all year).
- State who people can go to if they have individual questions or want more help.
- Plan for the evaluation and monitoring of the program.

How much activity is enough?

This is easiest explained using the chart on the following page. The goal of being active is to stay in the middle of the chart.

Types of Activities

Try to find a balance of activities over the period of a week or so.

Endurance (aerobic) exercise helps improve the body's ability to use oxygen.

- Walking
- Golfing (without a cart)
- Cycling
- Dancing

Flexibility routines help to maintain the body's ability to bend and stretch easily.

- Gardening / Yard work
- Yoga
- Tai chi

Strength training helps strengthen muscles as well as improving balance and posture.

- Climbing stairs
- Lifting and carrying young children
- Lifting weights

TIME NEEDED DEPENDS ON EFFORT

Very Light Effort	Light Effort	Moderate Effort	Vigorous Effort	Maximum Effort
	60 minutes a day (Can accumulate in 10 minute periods)	30-60 minutes (As you progress, you can cut down to 30 minutes, 4 days a week	20-30 minutes	
Strolling Dusting	Light walking Volleyball Easy gardening Stretching	Brisk walking Biking Raking leaves Swimming Dancing Water aerobics	Aerobics Jogging Hockey Basketball Fast swimming Fast dancing	Sprinting Racing
How should I feel while exercising? How warm am I? What is my breathing like?				
No change from when you are resting Normal breathing	Starting to feel warm Slight increase in breathing rate	Warmer Greater increase in breathing rate	Quite warm More out of breath	Very hot/perspiring heavily Completely out of breath

From: Health Canada. 2000. *Handbook for Canada's Physical Activity Guide to Healthy Active Living*

Getting Started

- [x] ENCOURAGE employees to get a fitness evaluation and/or health risk appraisal from their doctor before starting any significant exercise program.

- [ ] WORK with senior management to resolve multiple factors (such as physical work environment, scheduling of work tasks, etc.) that can influence the employee's capacity to be active.

- [ ] HELP individuals find that *one reason* they need to get started and help them recognize that reasons to stay active may change over time.

- [ ] ENCOURAGE people to start with one small activity. Whatever their situation or ability, they can try a variety of activities to improve their health and find out what is right for them.

- [ ] PROVIDE the information that people need. Often the act of looking for information is the first step towards getting started.

- [ ] ALLOW participants to choose activities that they like to do.

- [ ] INVITE potential participants to watch activities or to participate in a trial class to see if they are interested.

- [ ] HAVE a person trained in cardiopulmonary resuscitation (CPR) present at moderate to high physical activity sessions.

- [ ] OFFER a variety of programs. Be sure there is a mixture of endurance, strength and flexibility activities.

Program Options

When offering an active living program at the workplace, be sure to offer a wide range of options. Topics for programs/activities may include:

☑ PROVIDE educational help through:

- Newsletters
- Bulletin boards
- Health fairs
- Guest speakers

POST safe biking and walking routes as alternate ways to *commute* to work. Provide secure bicycle racks (and lockers/showers, if possible) to encourage staff to bike to work.

POST maps of scenic (and safe) walking routes of various lengths that can be used during lunch break. If your facility is large enough, map out and post a safe indoor walking route for bad weather days. Routes do not have to be long – a 10-minute route will help reach more participants.

ORGANIZE a ride to a park or walking path area at lunch.

HOST recreational activities:

- Create a "Distance Club" and acknowledge those who reach milestones. Challenge other departments or workplaces.
- Have a *Play Day* – instead of sitting down to a lunch for the office birthday party, head over to the bowling alley for an hour (or two!).

FIND out what facilities are within a reasonable distance to the office building.

ARRANGE for reduced membership fee at a local fitness facility, or provide financial assistance (e.g., half price up to a maximum amount per year).

HAVE an on-site facility or exercise equipment room. If the workplace does not have a trainer on-site, be sure that at least two people are present in the room when anyone is using the equipment.

GET INVOLVED in community events such as the *Terry Fox Run* (Cancer Society) or the *Walk for Heart* (Heart and Stroke Foundation).

HOST a *walking shoe clinic* so people can learn how to pick the right shoes for them.

ENCOURAGE staff to find a *buddy* to help encourage each other.

PUT up signs in the elevators encouraging people to use the stairs.

Tips of the week

I WILL PARK at the farthest end of the parking lot or get off the bus 2 stops early.

I WILL TAKE the stairs every time I only have 1 or 2 flights.

I WILL WALK for 20 minutes on three days.

I WILL REMEMBER to add up every 10-minute activity period.

I WILL PLAY with my kids instead of watching them.

I WILL HIDE the remote control for my television at home and change channels manually.

How can the employer help?

Many times people do not feel they have time to 'add' activity into their day. The workplace can help.

- Have flexible working hours. Allowing people to arrive at work a little later, or leave a little earlier can help them add activity to their day.
- Job sharing, telecommuting, and on-site day care will also provide some flexibility to schedules.
- Allow individuals to take an extra half hour twice a week at lunch to walk or to attend fitness classes, etc.

- Encourage people to walk to a co-workers office or workstation rather than using the telephone.
- Start each workday or shift with a pre-shift stretch program

Did you know?

One expert has suggested that about 100 years ago, at least 50% of the population got enough exercise during the workday to stay in shape. Today, this is true for fewer than 2%.

From: Health Care Health and Safety Association of Ontario, 2000. *A Step in the Right Direction: Wellness in the Workplace*

Example

Organizing a Pre-shift Stretch Program

Pre-shift stretch programs are inexpensive, and can help prevent injuries, improve the overall flexibility and muscle tone of the participants. While most often used for jobs that involve movements (especially repetitive movements) such as packing orders, shipping, maintenance, assembly line, etc., stretch programs are also be beneficial for computer users.

☑ INVOLVE shift supervisors, and management from the beginning. You will need their approval to use 10 to 15 minutes of production time.

DETERMINE when the best time is to stretch. After the morning safety meeting? In the middle of the shift?

DETERMINE where the program will take place? At the workstation? In a separate room?

OUTLINE various stretches and moves that can be done without needing to lie on the floor. Will participants be able to lean on a wall or chair?

BE SURE that your stretches target the large muscle groups as well as those muscles that are involved in the work the participants do. The aim is to loosen, stretch, shape and strengthen the muscles.

EXPLAIN to participants, before the start of the program, the benefits to them directly (increase flexibility and muscle tone which should decrease chance for injury), and that management has agreed to give them the time to participate.

ALWAYS ASK if anyone has a medical condition that should be seen by a doctor before they start the program.

ENCOURAGE those who do not want to participate to engage in duties or activities that provide their body a chance to *warm up* for the shift, or that offer a change in the muscle groups used during work time.

WHILE STRETCHING:

- Remind participants to do all stretches in a slow, gentle and relaxed way.
- Stretches should be done to the point of mild tension.
- Tell participants to stop if they feel pain.
- Maintain normal breathing throughout the stretches.

ASK if one of the participants would like to lead the sessions, as the program progresses.

Section V

Information Sources

1. Major Health Organizations in Canada and the United States
2. Canadian Government Departments with Responsibility for Occupational Health and Safety
3. US Federal Safety and Health Agencies

1. Major Health Organizations in Canada and the United States*

National Offices are listed here. Many organizations have branch and regional offices throughout Canada or the United States. Visit the web site, or call the national office to see if there is a local office in your region.

* We have mentioned these organizations as a means of providing a potentially useful referral. You should contact the organization(s) directly for more information about their information and/or services. Please note that mention of these organizations does not represent a recommendation or endorsement by CCOHS of these organizations over others of which you may be aware.

Canada

The Arthritis Society of Canada
393 University Avenue, Suite 1700
Toronto, ON M5G 1E6
Phone: 416-979-7228
Fax: 416-979-8366
Web Site: http://www.arthritis.ca/

Asthma Society of Canada
130 Bridgeland Avenue, Suite 425
Toronto, ON M6A 1Z4
Phone: 1-800-787-3880
Fax: (416) 787-5807
Web Site: http://www.asthmasociety.com/

Canada Safety Council
1020 Thomas Spratt Place,
Ottawa, ON K1G 5L5
Phone: (613) 739-1535
Fax: (613) 739-1566
Web Site: http://www.safety-council.org/

Canadian AIDS Society
130 rue Albert Street, Suite 900
Ottawa (Canada) K1P 5G4
Phone: (613) 230-3580
Fax: (613) 563-4998
Web Site: http://www.cdnaids.ca/

Canadian Cancer Society
10 Alcorn Avenue, Suite 200
Toronto, ON M4V 3B1
Phone: (416) 961-7223
Fax: (416) 961-4189
Web Site: http://www.cancer.ca/

Canadian Council for Tobacco Control
75 Albert Street, Suite 508
Ottawa, ON K1P 5E7
Phone: (800) 267-5234 / (613) 567-3050
Fax: (613) 567-2730
Web Site: http://www.cctc.ca/

Canadian Dental Association
1815 Alta Vista
Ottawa, ON K1G 3Y6
Phone: (613) 523-1770
Fax: (613) 523-7736
Web Site: http://www.cda-adc.ca/

Canadian Diabetes Association
15 Toronto St., Suite 800
Toronto, ON M5C 2E3
Phone: (416) 363-3373
Fax: (416) 214-1899
Web Site: http://www.diabetes.ca/

Canadian Hearing Society
271 Spadina Road,
Toronto, ON M5R 2V3
TTY: (416) 964-0023
Phone: (416) 964-9595
Fax: (416) 928-2506
Web Site: http://www.chs.ca

Canadian Liver Foundation
Suite 1500, 2235 Sheppard Avenue East
Toronto, ON M2J 5B5
Phone: 1-800-563-5483 / (416) 491-3353
Fax: (416) 491-4952
Web Site: http://www.liver.ca

Canadian Lung Association
The Lung Association National Office
3 Raymond Street, Suite 300
Ottawa, ON K1R 1A3
Phone: 613-569-6411
Fax: 613-569-8860
Web Site: http://www.lung.ca/

Canadian Mental Health Association
2160 Yonge, 3rd floor - 3e étage
Toronto, ON M4S 2Z3
Phone: (416) 484-7750
Fax: (416) 484-4617
Web Site: http://www.cmha.ca/

Canadian National Institute for the Blind
CNIB National Communications
1929 Bayview Avenue
Toronto, ON M4G 3E8
Phone: (416) 480-7644
Fax: (416) 480-7019
Web Site: http://www.cnib.ca/

Canadian Red Cross Society
170 Metcalfe St.
Ottawa, ON K2P 2P2
Phone: (613)740-1900
Fax: (613)740-1911
Web Site: http://www.redcross.ca/

Dietitians of Canada
480 University Avenue, Suite 604
Toronto, ON M5G 1V2
Phone 416.596.0857
Fax 416.596.0603
Web Site: http://www.dietitians.ca

Earth Day Canada
Suite 500, 296 Richmond Street West,
Toronto ON M5V 1X2
Phone: (416) 599-1991
Fax: (416) 599-3100
Web Site: http://www.earthday.ca

Easter Seals / March of Dimes Canada
90 Eglinton Avenue East, Suite 511
Toronto, ON M4P 2Y3
Phone: (416) 932-8382
Fax: (416) 932-9844
TTY: (416) 932-8151
Web Site: http://www.esmodnc.org/

Health Canada
A.L. 0900C2
Ottawa, Canada K1A 0K9
Phone: (613) 957-2991
Fax: (613) 941-5366
Web Site: http://www.hc-sc.gc.ca

Heart and Stroke Foundation of Canada
222 Queen Street, Suite 1402
Ottawa, ON K1P 5V9
Phone (613) 569-4361
Fax (613) 569-3278
Web Site: http://ww2.heartandstroke.ca/

Kidney Foundation of Canada
200-1200 Eglinton Avenue East
Don Mills, ON M3C 1H9
Phone: (416) 445-0373
Fax: (416) 445-7440
Web Site: http://www.kidney.ca

Population and Public Health Branch
(Formerly: Laboratory Centre for Disease Control) via Health Canada
0904A, Brooke Claxton Bldg, Tunney's Pasture
Ottawa, Canada K1A 0K9
Phone: (613) 957-2991
Fax: (613) 941-5366
Web Site: http://www.hc-sc.gc.ca/pphb-dgspsp/index.html

Multiple Sclerosis Society of Canada
250 Bloor Street East, Suite 1000
Toronto, ON M4W 3P9
Phone: 1 800 268-7582 / (416) 922-6065
Facsimile: (416) 922-7538
Web Site: http://www.mssociety.ca/

Osteoporosis Society of Canada
33 Laird Drive
Toronto, ON M4G 3S9
Phone: 1 800 463-6842, (416) 696-2663
Fax: (416) 696-2673
(French) 1 800 977-1778 (in Canada only)
Web Site: http://www.osteoporosis.ca/index.shtml

Volunteer Canada
430 Gilmour Street
Ottawa, ON K2P 0R8
Phone: (800) 670-0401 / (613) 231-4371
Fax: (613) 231-6725
Web Site: http://www.volunteer.ca/

United States of America

American Academy of Dermatology
930 N. Meacham Road, PO Box 4014
Schaumburg, IL 60168-4014
Phone (847) 330-0230
Fax (847) 330-0050
Web Site: http://www.aad.org/

American Association for World Health
1825 K St. NW, Suite 1208
Washington, DC 20006
Phone 202-466-5883
Fax 202-466-5896
Web Site: http://www.aawhworldhealth.org/

American Cancer Society
1599 Clifton Road, N.E.
Atlanta, GA 30329-4251
Phone: 1-800-ACS-2345 or (404) 320-3333
Web Site: http://www.cancer.org/

American Council of the Blind
1155 15th Street, NW, Suite 1004
Washington, DC 20005
Phone: (202) 467-5081 (800) 424-8666
Fax: (202) 467-5085
Web Site: http://www.acb.org/

American Diabetes Association
1701 North Beauregard Street
Alexandria, VA 22311
Phone : 1-800-DIABETES (1-800-342-2383)
Web Site: http://www.diabetes.org/

American Dietetic Association
216 W. Jackson Blvd.
Chicago, IL 60606-6995
Phone: 312-899-0040
Web Site: http://www.eatright.org/

American Heart Association
7272 Greenville Avenue
Dallas, TX 75231
Phone: 1-800-AHA-USA-1 (1-800-242-8721)
Web Site: http://www.americanheart.org/

American Liver Foundation
75 Maiden Lane, Suite 603
New York, NY 10038
Phone: 1-800-GOLIVER (1800-465-4837)
Web Site: http://www.liverfoundation.org/

American Lung Association
1740 Broadway
New York, NY 10019
212-315-8700
Web Site: http://www.lungusa.org/

American Red Cross
Office of the General Counsel
430 17th Street NW
Washington D.C. 20006-5307
Phone: 1-800-HELP-NOW (1-800-435-7669)
Web Site: http://www.redcross.org/

American Stroke Association, a division of the American Heart Association
7272 Greenville Avenue
Dallas TX 75231
Phone: 1-888-4-STROKE (1-888-478-7653)
Web Site: http://www.StrokeAssociation.org

March of Dimes Birth Defects Foundation
1275 Mamaroneck Avenue
White Plains, NY 10605
Phone: 888-MODIMES (663-4637)
Web Site: http://www.modimes.org/

National Heart, Lung and Blood Institute, National Institutes of Health
Bethesda, Maryland, 20892
Phone: 301-496-4000
Web Site: http://www.nhlbi.nih.govv

National Kidney Foundation
30 East 33rd St., Suite 1100
New York, NY 10016
Phone: (800) 622-9010 or (212) 889-2210
Fax: (212) 689-9261
Web Site: http://www.kidney.org/

National Stroke Association
9707 E. Easter Lane
Englewood, Co. 80112
Toll Free: 1-800-STROKES
Phone: 303-649-9299
Fax: 303-649-1328
Web Site: http://www.stroke.org/

2. Canadian Government Departments with Responsibility for Occupational Health and Safety

Canadian Centre for Occupational Health and Safety (CCOHS)

Client Services
Phone: 905-570-8094
Toll-free: 1-800-668-4284 (Canada and US only)
Fax: 905-572-2206
E-mail: clientservices@ccohs.ca
Web Site: www.ccohs.ca

Inquiries Service
(FREE answers to your OH&S questions)
Phone: 905-572-4400
Toll-free: 1-800-263-8466 (Canada only)
Fax: 905-572-4500
E-mail: inquiries@ccohs.ca
OSH Answers Web Site: www.ccohs.ca/oshanswers

Federal Jurisdiction

Labour Program
Human Resources Development Canada
Ottawa ON K1A 0J2
General information on federal programs, services and initiatives:
Toll-free: 1-800-O-Canada (1-800-622-6232)
Web Site: www.hrdc-drhc.gc.ca/common/workplace.shtml

Regional Internet Sites
www.hrdc-drhc.gc.ca/maps/national/canada.shtml

Provincial Jurisdictions

Alberta

Workplace Health and Safety
Alberta Human Resources and Employment
9940-106 Street
Edmonton, AB T5K 2N2
General Inquiries: (780) 415-8690
Toll-free: 1-866-415-8690
Fax: (780) 422-3730
E-mail: whs@gov.ab.ca
Web Site: www.gov.ab.ca/hre/whs

British Columbia

Workers' Compensation Board of British Columbia
6951 Westminster Highway (Richmond, BC)
PO Box 5350 Stn Terminal
Vancouver, BC V6B 5L5

Workplace Safety and Health Inquiries
Phone: (604) 276-3100
Toll-free in B.C.: 1-888-621-7233 (SAFE)

Health and Safety Emergency Accident Reporting
Toll-free in B.C.: 1-888-621-7233 (SAFE)
After hours: 1-866-922-4357
Web Site: www.worksafebc.com

Manitoba

Workplace Safety and Health Division
Manitoba Labour and Immigration
200-401 York Avenue
Winnipeg, MB R3C 0P8
General Inquiries: (204) 945-3446
Toll free in Manitoba: 1-800-282-8069
After hours: (204) 945-0581
Fax: (204) 945-4556
Web Site: www.gov.mb.ca/labour/safety

New Brunswick

Workplace Health, Safety and Compensation Commission of New Brunswick

500 Beaverbrook Court
Fredericton, NB E3B 5X4
General Inquiries: (506) 453-2467
Toll-free in NB: 1-800-442-9776
E-mail: prevention@whscc nb.ca
Fax: (506) 453-7982
Web Site: www.whscc.nb.ca

Newfoundland and Labrador

Department of Labour

Confederation Building, 4th Floor, West Block
PO Box 8700
St. John's, NL A1B 4J6
General Inquiries: (709) 729-7420
Toll-free in NL: 1-800-563-5471
Fax: (709) 729-3445
Web Site: www.gov.nf.ca/labour/

Northwest Territories and Nunavut

Workers' Compensation Board of Northwest Territories and Nunavut

PO Box 8888
Yellowknife, NT X1A 2R3
General Inquiries: (867) 920-3888
Toll free: 1-800-661-0792
Fax: (867) 873-4596
E-mail: yellowknife@wcb.nt.ca
Web Site: www.wcb.nt.ca/home.htm

Iqaluit

PO Box 669
Iqaluit, NU X0A 0H0
Phone: (867) 979-8500
Fax: 1-800-877-404-4407
E-mail: iqaluit@wcb.nt.ca
Web Site: www.wcb.nt.ca/home.html

Nova Scotia

Nova Scotia Department of Environment and Labour
Occupational Health and Safety Division
5151 Terminal Rd., 6th Floor
PO Box 697
Halifax, NS B3J 2T8
General Inquiries: (902) 424-5400
Toll free in NS: 1-800-952-2687
Fax: (902) 424-5640
E-mail: labrohs@gov.ns.ca
Web Site: http://www.gov.ns.ca/enla/ohs

Ontario

Ministry of Labour
Occupational Health and Safety Branch
655 Bay Street, 14th Floor
Toronto, ON M7A 1T7
General Inquiries: (416) 326-7770
Toll free in Ontario: 1-800-268-8013
Fax: 416-326-7761
E-mail: webohs@mol.gov.on.ca
Web Site: www.gov.on.ca/lab/ohs

Prince Edward Island

Workers' Compensation Board of PEI
Occupational Health and Safety Division
PO Box 757, 14 Weymouth Street
Charlottetown, PE C1A 7L7
General Inquiries: (902) 368-5680
Toll-free in PEI: 1-800-237-5049
Fax: (902) 368-5696
Web Site: www.wcb.pe.ca

Québec

Commission de la santé et de la sécurité du travail du Québec (CSST) (Occupational Health & Safety Commission)

CP 6056, Succursale Centre-ville
Montréal, PQ H3C 4E1
Phone: (514) 906-3060
Toll-free in PQ: 1-800-667-7585
Fax: (514) 906-3062
Web Site: www.csst.qc.ca

Saskatchewan

Saskatchewan Labour
Occupational Health and Safety Division

1870 Albert Street
Regina, SK S4P 3V7
Toll-free in SK: 1-800-567-7233
Fax: (306) 787-2208
E-mail: webmaster@lab.gov.sk.ca
Web Site: www.labour.gov.sk.ca/

Saskatoon Office:
Phone: (306) 933-5042
Toll-free: 1-800-667-5023
Fax: (306) 933-7339

Yukon Territory

Yukon Workers' Compensation
Health and Safety Board

401 Strickland Street
Whitehorse, YT Y1A 5N8
General Inquiries: (867) 667-5645
Toll free in the Yukon: 1-800-661-0443
Fax: (867) 393-6279
E-mail: worksafe@gov.yk.ca
24-hour Emergency Line for Reporting Serious Workplace Accidents and Injuries: (867) 667-5450
Web Site: www.wcb.yk.ca

For an up-to-date listing of information sources visit *http://www.ccohs.ca/oshanswers/information/govt.html*

2. US Federal Safety and Health Agencies

US Environmental Protection Agency (EPA)

Ariel Rios Building
1200 Pennsylvania Avenue NW,
Mail Code 3213A
Washington, DC 20460
Phone: (202) 272-0167
Web Site: www.epa.gov

National Institute for Occupational Safety and Health (NIOSH)

4676 Columbia Parkway, Mail Stop C-13
Cincinnati, OH 45226-1998
Toll-free in the US: 1-800-35-NIOSH
(1-800-356-4674)
Outside the US: (513) 533-8328
E-mail: cdchecinfo@cdc.gov
Web Site: www.cdc.gov/NIOSH/homepage.html

Occupational Safety & Health Administration (OSHA)

200 Constitution Ave., NW
Washington, DC 20210
Phone: (202) 693-2000
Toll free Emergency Reporting: 1-800-321-OSHA (6742)
Web Site: www.osha.gov

A listing of the Regional Offices follows:

OSHA Regional Offices

Region 1: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont, US Dept. of Labor – OSHA

JFK Federal Building, Room E340
Boston, MA 02203
Phone: (617) 565-9860
Fax: (617) 565-9827
Web Site: www.osha.gov/oshdir/r01.html

Region 2: New Jersey, New York, and Puerto Rico, Virgin Islands, USA Dept. of Labor – OSHA

201 Varick St., Rm. 670
New York, NY 10014
Phone: (212) 337-2378
Fax: (212) 337-2371
Web Site: www.osha.gov/oshdir/r02.html

Region 3: District of Columbia, Delaware, Maryland, Pennsylvania, Virginia and West Virginia, USA Dept. of Labor – OSHA

The Curtis Center, Suite 740 West
170 S. Independence Mall West
Philadelphia, PA 19106-3309
Phone: (215) 861-4900
Fax: (215) 861-4904
Web Site: www.osha.gov/oshdir/r03.html

Region 4: Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee, USA Dept. of Labor – OSHA

61 Forsyth St. SW
Atlanta, Georgia 30303
Phone: (404) 562-2300
Fax: (404) 562-2295
Web Site: www.osha.vog/oshdir/r04.html

Region 5: Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin, USA Dept. of Labor – OSHA
230 South Dearborn St., Rm. 3244
Chicago, IL 60604
Phone: (312) 353-2220
Fax: (312) 353-7774
Web Site: www.osha.gov/oshdir/r05.html

Region 6: Arkansas, Louisiana, New Mexico, Oklahoma, and Texas, USA Dept. of Labor – OSHA
525 Griffin St., Rm. 602
Dallas, TX 75202
Phone: (214) 767-4731
Fax: (214) 767-4693
Web Site: www.osha.gov/oshdir/r06.html

Region 7: Iowa, Kansas, Missouri, and Nebraska, USA Dept. of Labor – OSHA
City Center Square
1100 Main St., Suite 800
Kansas City, MO 64105
Phone: (816) 426-5861
Fax: (816) 426-2750
Web Site: www.osha.gov/oshdir/r07.html

Region 8: Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming, USA Dept. of Labor – OSHA
1999 Broadway, Suite 1690
PO Box 46550
Denver, CO 80202-6550
Phone: (303) 844-1600
Fax: (303) 844-1616
Web Site: www.osha.gov/oshdir/r08.html

Region 9: Samoa, Arizona, California, Guam, Hawaii, Nevada, and Trust Territory of the Pacific Islands, USA Dept. of Labor – OSHA

71 Stevenson Street St.
4th Floor, Suite 420
San Francisco, CA 94105
Phone: (415) 975-4310
Fax: (415) 975-4319
Web Site: www.osha.gov/oshdir/r09.html

Region 10: Alaska, Idaho, Oregon, Washington, USA Dept. of Labor – OSHA

1111 Third Avenue, Suite 715
Seattle, Washington 98101-3212
Phone: (206) 553-5930
Fax: (206) 553-6499
Web Site: www.osha.gov/oshdir/r10.html

3. State Occupational Safety and Health Plans

Alaska

Alaska Department of Labor and Workforce Development
P.O. Box 21149
Juneau, Alaska 99801-1149
Physical location:
1111 W. 8th Street, Room 304
Juneau, Alaska 99801-1149
Phone: (907) 269-4955
Toll-free: 1-800-770-4940
Fax: (907) 269-4950
Web Site: www.labor.state.ak.us/lss/home.htm

Arizona

Industrial Commission of Arizona
800 W. Washington
Phoenix, Arizona 85007-2922
Phone: (602) 542-5795
Fax: (602) 542-1614
Web Site: www.ica.state.az.us/ADOSH/oshatop.htm

California

California Department of Industrial Relations
455 Golden Gate Avenue - 10th Floor
San Francisco, California 94102
Phone: (415) 703-5050
toll-free: 1-800-963-9424
Fax: (415) 703-5114
Web Site: www.dir.ca.gov/occupational_safety.html

Connecticut

Connecticut Department of Labor
Consultation Services
Division of Occupational Safety and Health
38 Wolcott Hill Road
Wethersfield, Connecticut 06109
Phone: (860) 566-4550
Fax: (860) 566-6916
Web Site: www.ctdol.state.ct.us/osha/osha.htm

Hawaii

Hawaii Department of Labor and Industrial Relations
Consultation and Training Branch
830 Punchbowl Street, Room 423
Honolulu, Hawaii 96813
Phone: (808) 586-9100
Fax: (808) 586-9104
Web Site: www.hiosh.hawaii.gov

Indiana

Indiana Department of Labor
Indiana Government Center – South
402 W. Washington Sreet, Room W195
Indianapolis, Indiana 46204
Phone: (317) 232-2655
Fax: (317) 232-3790
Web Site: http://www.state.in.gov/labor

Iowa

Iowa Division of Labor Services
Occupational Safety and Health
1000 E. Grand Avenue
Des Moines, Iowa 50319-0209
Phone:(515) 281-7629 Consultation
Phone:(515) 281-0202 Education
Fax: (515) 281-5522
Web Site: www.state.ia.us/iwd/labor/index.html

Kentucky

Kentucky Labor Cabinet
1047 U.S. Highway 127 South, Suite 4
Frankfort, Kentucky 40601

OSH Division of Compliance
Phone: (502) 564-3070 ext. 266
Fax: (502) 564-4769

OSH Division of Education and Training
Phone: (502) 564-3070
Fax: (502) 564-4769
Web Site: www.labor.ky.gov/osh/index.htm

Maryland

Maryland Department of Labor, Licensing and Regulation
1100 North Eutaw Street, Room 613
Baltimore, Maryland 21201-2206
Maryland Occupational Safety & Health (MOSH)
Phone: (410) 767-2215
Fax: (410) 333-7747
Web Site: http://www.dllr.state.md.us/labor/mosh.html

Michigan

Michigan Department of Consumer and Industry Services, Bureau of Safety and Regulation
7150 Harris Drive
P.O. Box 30643
Lansing, Michigan 48909-8143
Phone: (517) 322-1814
Fax: (517) 322-1775
Web Site: www.michigan.gov/cis/0,1607,7-154-11407---,00.html

Minnesota

Minnesota Department of Labor and Industry
443 Lafayette Road North
St. Paul, Minnesota 55155-4311
Phone: (651) 284-5060
Fax: (651) 284-5781
Web Site: www.doli.state.mn.us/wsc.html

Nevada

Nevada Division of Industrial Relations
Occupational Safety and Health Enforcement
1301 N. Green Valley Parkway – Suite 200
Henderson, Nevada 89014
Phone: (702) 486-9020
Fax: (702) 990-0360
Web Site: dirweb.state.nv.us

New Jersey

New Jersey Department of Labor
Labor Standards and Safety Enforcement
Safety and Health
225 E. State Street
8th Floor West
P.O. Box 953
Trenton, New Jersey 08625-0953
Phone: (609) 292-3923
Fax: (609) 292-4409
Web Site: www.state.nj.us/labor/lsse/lspeosh.html

New Mexico

New Mexico Environment Department
Occupational Health and Safety Bureau
525 Camino de Los Marquez, Suite 3
PO Box 26110
Santa Fe, New Mexico 87502
Phone: (505) 827-4230
Fax: (505) 827-4422
Web Site: www.nmenv.state.nm.us/OHSB_website/ohsb_home.htm

New York

New York Department of Labor
Workplace Safety & Loss Prevention Program
Room 167 Bldg. 12 State Campus
Albany, New York 12240W
Phone: (518) 457-1125
Fax: (518) 485-1167
Web Site: www.labor.state.ny.us/business_ny/employer_responsibilities/safety/shdists.htm

North Carolina

North Carolina Department of Labor
4 West Edenton Street
Raleigh, North Carolina 27601
Bureau of Consultative Services
Phone: (919) 807-2796
Fax: (919) 807-2902
Web Site: www.nclabor.com/osha/osh.html

Oregon

Oregon Occupational Safety and Health Division
Department of Consumer & Business Services
350 Winter Street, NE, Room 430
Salem, Oregon 97310-3882
Phone: (503) 378-3272
Toll-free in Oregon: (800) 922-2689
Web Site: www.orosha.org

Puerto Rico

Puerto Rico Department of Labor and Human Resources
Occupational Safety and Health Office
Department of Labor and Human Resources
20th Floor
505 Muñoz Rivera Avenue
Hato Rey, Puerto Rico 00918
Phone: (787) 756-1100, 1106
Fax: (787) 767-6051
Web Site: www.osha.gov.fso/osp/PRstandards.html

South Carolina

South Carolina Department of Labor, Licensing and Regulation
Office of OSHA Compliance
3600 Forest Drive
PO Box 11329
Columbia, South Carolina 29211-1329
Phone: (803) 734-9595
Fax: (803) 734-9772
Web Site: www.llr.state.sc.us/osha.asp

Tennesse

Tennessee Department of Labor and Workforce Development
710 James Robertson Parkway, 3rd Floor
Nashville, Tennessee 37243-0659
Phone: (615) 741-2793
Toll-free: 1-800-249-8510
Fax: (615) 253-1623
Web Site: www.state.tn.us/labor-wfd/tosha.html

Utah

Labor Commission of Utah
160 East 300 South, PO Box 146650
Salt Lake City, Utah 84114
Phone: (801) 530-6901
Fax: (801) 530-6992
Web Site: www.uosh.utah.gov

Vermont

Vermont Department of Labor and Industry
Occupational Safety & Health Administration
National Life Building, Drawer 20
National Life Drive
Montpelier, Vermont 05602-3401
Phone: (802) 828-2765
Fax: (802) 828-2195
Web Site: www.state.vt.us/labind/vosha.htm

Virginia

Virginia Department of Labor and Industry (VOSH)
Powers-Taylor Building
13 South 13th Street
Richmond, Virginia 23219
Phone: (804) 786-8707
Fax: (804) 371-6524
Web Site: doli.state.va.us/whatwedo/coop_prog/consultation.html

Virgin Islands

Virgin Islands Department of Labor
Division of Occupational Safety and Health
3021 Golden Rock
Christiansted, St. Croix, Virgin Islands 00840
Phone: (340) 772-1315
Fax: (340) 772-4323

Washington

Washington Department of Labor and Industries
PO Box 44850
Olympia, Washington 98504-4850
Phone : (360) 902-5799
Fax: (360) 902-5792
Toll-free: 1-800-423-7233
Web Site: www.lni.wa.gov/wisha

Wyoming

Wyoming Department of Employment
Occupational Health and Safety
1510 East Pershing Blvd., West Wing
Cheyenne, Wyoming 82002
Phone: (307) 777-7786
Fax: (307) 777-3646
Web Site: wydoe.state.wy.us/doe.asp?ID=7

Section VI

Appendices

A1. Workplace Health and Wellness Survey

A2. Selecting a Consultant

A3. Abbreviations

A4. References / Other Resources

Appendices

These survey questions are intended to be suggestions on how to gather information about employee needs and interests. It is not a *quantifiable* benchmark survey. Many *formal* surveys are available either on the Internet, at a resources centre/library or from health agencies and professionals.

When using surveys, keep in mind what you want to do with the information you gather. Also, remember to ask questions that will address the complete working environment (physical, social, mental, etc.). Your survey may reveal 3 or 4 major areas of interest or concern. You may want to create a focus group to discuss these areas, help prioritize them, and then discuss possible solutions.

Sample Survey Questions

Pick a combination of both open ended (where people can write whatever they like) and closed (where they choose from a list of options) style questions – this mixture allows you to find out some concrete data on set questions as well as allowing individuals to express their own thoughts.

Questions in this section include a general survey as well as more detailed questions organized by topic. Pick and choose which questions are most appropriate to your workplace needs. Add your own questions to customize your survey.

A1. Workplace Health & Wellness Survey

Sample

WORKPLACE HEALTH & WELLNESS SURVEY

ABC Company is thinking about offering workplace health and wellness programs. We are interested in learning more about your opinions and interests. Your answers will be used to help plan the program and to decide which types of programs to offer.

- Senior management has agreed to let everyone take a few minutes to complete this survey.
- Please do not put your name on the form because we would like to keep this survey confidential.
- Please return the forms by putting them in the sealed envelope (provided) and placing them in the inner-office mail.

1. Sex: ❑ Male ❑ Female

2. Age Group: ❑ under 21 ❑ 21 – 30 ❑ 31 – 40 ❑ 41 – 50 ❑ 51 – 60 ❑ Over 60

3. Do you have any health concerns about yourself, your family, or something arising from the workplace?

_____

_____

_____

4. Would you like ABC Company to help with these concerns?
❑ Yes ❑ No ❑ Not sure

Explain your answer _____

_____

_____

5. Indicate how you feel about the following statements:

	Agree Strongly	Agree	Not sure/ No opinion	Disagree	Disagree Strongly
On the whole, I like my job.	❑	❑	❑	❑	❑
I feel that I am well rewarded for the effort I put in at work.	❑	❑	❑	❑	❑
I am happy with the balance between my work time and my leisure time.	❑	❑	❑	❑	❑
At work, my level of authority is about the same as my level of responsibility.	❑	❑	❑	❑	❑

6. Which of the following activities would you prefer to participate in? (Check all that you might be interested in or like to join)

	Yes	No	Maybe
Aerobic exercise	❑	❑	❑
Walking Club	❑	❑	❑
Recreational Team (e.g. basehall)	❑	❑	❑
Other exercise programs	❑	❑	❑
Healthy Backs	❑	❑	❑
Healthy Eating (general tips, etc.)	❑	❑	❑
Weight Management	❑	❑	❑
Blood Cholesterol Testing	❑	❑	❑
Flu Shots	❑	❑	❑
Blood Pressure Screening	❑	❑	❑
Blood Glucose Screening	❑	❑	❑
Body/Mass Index (BMI) Testing	❑	❑	❑
Stress Management (either home/work)	❑	❑	❑
Alcohol / Drug Abuse Education	❑	❑	❑
Smoking Cessation	❑	❑	❑
Parenting	❑	❑	❑
Marital Situations	❑	❑	❑

	Yes	No	Maybe
Interpersonal Skills (such as "Dealing with Difficult People", Conflict Resolution, etc.)	❑	❑	❑
Retirement Planning	❑	❑	❑
Lunch & Learn Sessions	❑	❑	❑
Time Management	❑	❑	❑
Home Budgeting / Financial Planning	❑	❑	❑
Health Fair (booths)	❑	❑	❑
Balancing Family and Work	❑	❑	❑

Other: (please list) _____

_____

7. When would you be able to participate?

❑ Monday	❑ Spring	❑ Before work
❑ Tuesday	❑ Summer	❑ Lunch time
❑ Wednesday	❑ Fall	❑ After work
❑ Thursday	❑ Winter	❑ Evenings
❑ Friday	❑ Other _____	

❑ Weekends (for family events)

8. Where would you prefer to attend a program?

❑ Work
❑ Private health club
❑ Local School or Facility/Hall
❑ Other

9. If necessary, would you be willing to share in the cost of a program? ❑ Yes ❑ No

10. Do you have any additional comments or concerns you would like the committee to know? _____

_____

_____

Additional Questions

Health surveys can be long or short, detailed or general. Below are some additional questions that may be used to tailor your questionnaire. Customize your survey for your workplace. Change open-ended questions to closed questions and vice versa if you wish.

Ergonomics

What percentage of your time is spent?

Sitting _____%

Standing _____%

Walking _____%

Operating a VDT (computer) _____%

Do you have a variety of tasks that allow you to leave your workstation from time to time? ❑ Yes ❑ No

In the last year, have you had pain or discomfort that has lasted more than two days in your:

Neck	❑ Yes	❑ No
Shoulder	❑ Yes	❑ No
Elbow	❑ Yes	❑ No
Wrist / forearm	❑ Yes	❑ No
Hand	❑ Yes	❑ No
Upper back	❑ Yes	❑ No
Lower back	❑ Yes	❑ No
Legs / Feet	❑ Yes	❑ No

Rate the level of pain or discomfort (please duplicate this page if more than one body part is affected)

	Goes away	Stays the same	Gets worse
At work	❑	❑	❑
After work	❑	❑	❑
After a week away from work	❑	❑	❑

Does the pain or discomfort interfere with:

Your work?	❑ Yes	❑ No
Your life outside of work?	❑ Yes	❑ No
Sleeping?	❑ Yes	❑ No

Health – General

What are your current health habits?

Would you like to improve some aspect of your health?

❑ Yes ❑ No

If yes, what?

What types of steps have you already taken?

What, if anything, is stopping you from making these changes?

Could your employer do something to help you improve or maintain your health?

I am in control of my own health. ❑ Yes ❑ No

Nutrition

I eat fresh fruits, vegetables, and whole grain breads.

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

I eat foods at home that are already prepared (pre-made).

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

I eat fast food more than once a week.

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

I eat foods that are high in cholesterol or fat (such as fatty meat, cheese, fried foods).

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

Are there factors that are preventing you from having health eating habits? Such as:

- ❑ Limited choices in the cafeteria
- ❑ Work schedule (including travelling)
- ❑ Not enough time to prepare proper meals
- ❑ Don't know how to choose foods
- ❑ Confused about what is "healthy"
- ❑ Other(s) _____

Do you do one of the following?

a) On average, I accumulate at least 60 minutes a day, every day of *active time* by either walking, playing volleyball, easy gardening or stretching.

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

b) On average, I participate in a moderately physical activity for at least 30-60 minutes, 4 times a week. Moderate level activities include brisk walking, recreational swimming, heavy gardening (raking leaves), dancing, or bicycling.

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

c) On average, I participate in a vigorous physical activity for at least 20-30 minutes, 4 times a week. Vigorous level activities include moving heavy objects, using exercise machines or fast walking, swimming, and bicycling.

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

I try to vary my activities to include endurance (aerobic), flexibility (stretching), and strength building activities.

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

I try to break up my TV and computer time by getting up and moving or stretching.

❑ Never ❑ Seldom ❑ Sometimes
❑ Often ❑ Always

Safety – At Work

What health and safety changes could be made at this workplace?

Would you like more training in one or more aspects of your job?

- If so, what?

Would you like to have some "at home" health and safety training?

Do you feel that the company only offers training courses when 'required by law'? ❑ Yes ❑ No

Do you feel that safety standards are being met in the following areas?

Lighting	❑ Yes	❑ No
Workstation Layouts	❑ Yes	❑ No
Noise Levels	❑ Yes	❑ No
Chemical / Material Exposure	❑ Yes	❑ No
General Temperature	❑ Yes	❑ No
Ventilation	❑ Yes	❑ No
Indoor Air Quality	❑ Yes	❑ No
Other(s) _____	❑ Yes	❑ No

Scents in the Workplace

Have you ever been affected by scented products?

- If so, in what way

Do you feel our company should offer programs encouraging employees to reduce the use of scents?

❑ Yes ❑ No

How should our company become scent-free?

- ❑ Change from heavily scented products to non-scented or low-scented products?
- ❑ Offer awareness sessions to employees about the health concerns related to scented products?
- ❑ Offer other incentives? If so, describe.

Do you use any scented products such as shampoo, soap, hand lotions, perfumes, cologne, hair spray, or deodorant before arriving at work?

❑ Yes ❑ No

Would you accept a Scent-Free policy for ABC Company?

❑ Yes ❑ No

If you are not willing to accept a Scent-Free policy, please describe why:

_____

_____

_____

Smoking

How many cigarettes do you smoke?

- ❑ Never Smoked / smoked less than 100 cigarettes in my lifetime
- ❑ Current smoker (____ cigarettes/____ cigars per day)
- ❑ Ex-smoker: Quit ____ years ago (or ____ months if less than a year)

Do you use chewing tobacco?

❑ Never ❑ Used to, but not anymore ❑ Yes

If you smoke, are you thinking about quitting?

❑ Yes ❑ No

Are you ready to try a smoking cessation technique or program? ❑ Yes ❑ No

Stress

Do you know what the sources of your stress are?

- ❑ Changed jobs
- ❑ Too many changes to my job or duties
- ❑ Too much time pressure
- ❑ My duties are not clear
- ❑ I don't have any control over what I do when.
- ❑ My work is boring
- ❑ Others _____

Do you feel that work contributes to your overall stress load?

What could the workplace do to help reduce stress at home or outside of work?

Do you feel you have a *say* in what happens at work?

What kinds of things do you think the workplace could do to help employees feel more in control of the work they do?

What can the workplace do to offer support, if you need it?

- ❑ I have had significant changes to my life outside of work
- ❑ Close family member or friend has been injured or ill.
- ❑ Close family member or friend has died.
- ❑ I have begun (or ended) a close relationship including getting married (or divorced).
- ❑ I have had a change in my living situation (moving, new room-mate, person left home)
- ❑ I don't have enough money to pay my bills, etc.
- ❑ Other(s) _____

Substance Abuse

How many drinks do you have in an average week? _____
(A drink is one bottle of beer, one 1.5 oz/45 ml shot of hard liquor or spirits, or a 5 oz/150 ml glass of wine)

Do you need a drink or more to "get you through the day"?
❑ Yes ❑ No

Do you use drugs (other than tobacco or alcohol) for non-medical reasons?

Do you use over-the-counter or prescription drugs to help you sleep, reduce pain, calm you down or to be happier (other than what your doctor has told you to use)?

❑ Daily or almost every day

❑ 2 or 3 times a week

❑ Once a week

❑ 2 or 3 times during the month

❑ Once only

❑ Never

Weight

I am about the right weight.
❑ Yes ❑ No

In general, I would like to lose some weight.
❑ Yes ❑ No

I am more than 20 pounds over my ideal weight.
❑ Yes ❑ No

If so, would you like to lose weight?
❑ Yes ❑ No

I am interested in attending a Body/Mass Index (BMI) screening clinic.
❑ Yes ❑ No

I have had a doctor tell me I should lose weight.
❑ Yes ❑ No

Questions adapted from:

Canadian Centre for Occupational Health and Safety (CCOHS). 1999. "Office Ergonomics, 3rd Edition"

National Quality Institute. 2001. Investing in Comprehensive Workplace Health Promotion: Companion Piece #7a. "Health in the Workplace Employee Questionnaire". (Copyright: Minister of Public Works and Government Services Canada, 2000)

Hunnicut, D. et al., 2000. "Health Promotion: Sourcebook for Canadian Businesses" Wellness Councils of Canada.

Health Canada. 1999. "Health Works: A how-to for health and business success"

Health Canada and the Canadian Society for Exercise Physiology (site last revised July 2000) "Physical Activity Guide to Active Living" http://www.hc-sc.gc.ca/hppb/paguide/main.html

National Wellness Institute (last modified October 2000) "TestWell" located at http://www.testwell.org

A2. Selecting a Consultant

You may need the services of a consultant when the preliminary investigation reveals that a detailed investigation is necessary. It is the client's responsibility to find a competent consultant who is qualified by education, knowledge and experience.

Sample

CONSULTANT'S QUALIFICATION CHECKLIST

Consultants Name _____

Employer/Company Name _____

_____

1. **Education**

   _____

2. **Certification and Registration**

   _____

3. **Current Awareness** (recent publications, attendance at seminars, symposia, courses, etc.)

   _____

   _____

4. **Years of Experience** _____

5. **Previous Clients** *(that can be contacted for reference)*

   _____ _____

6. **Equipment** (if applicable)

   _____

   _____

7. **Define the Work to be Done** (List services to be provided):

8. **Estimated Cost of Service**

Notes

A3. Abbreviations

ACGIH

American Conference of Governmental Industrial Hygienists. ACGIH is a professional society of government workers and educators who work to promote occupational safety and health. The organization publishes recommendations on ventilation, air sampling and airborne chemical concentration guideline (threshold limit values or TLVS) designed to limit and control exposure of workers to airborne chemicals in the workplace.

ANSI

American National Standards Institute; an American organization that produces the ANSI standards.

ASHRAE

American Society of Heating, Refrigeration and Air Conditioning Engineers— sets ventilation and other standards related to the indoor environment.

CCOHS

Canadian Centre for Occupational Health and Safety. Canada's national organization for promotion of workplace health and safety by providing information, advice, and training.

CGSB

Canadian General Standards Board.

CSA

Canadian National Standards Association, a national organization that produces CSA standards.

EPA

U.S. Environmental Protection Agency.

IAPA

Industrial Accident Prevention Association, Ontario.

IARC

International Agency for Research on Cancer. IARC, part of the World Health Organization, is an international organization that evaluates the human cancer risk from chemical exposure.

ISO

International Organization for Standardization, an international organization that produces the ISO standards.

MSDS

Material Safety Data Sheet—provides information about toxicity and safe work practices for chemicals

NFPA

National Fire Protection Association (USA). Publishes the Fire Code.

NIOSH

U.S. National Institute for Occupational Safety and Health. NIOSH, part of the Center for Disease Control, conducts research on worker safety and health and recommends standards for worker protection to OSHA.

OSHA

U.S. Occupational Safety and Health Administration, develops and enforces health and safety legislation

PPE

Personal protective equipment: hard hat, ear plugs, safety boots, gloves, etc

TLV

Threshold Limit Values recommended by ACGIH—often used as guidelines to set occupational exposure limits

UV

Ultraviolet radiation—invisible radiation emission from the welding arcs

WCB

Workers' Compensation Board

WSIB

Workplace Safety and Insurance Board (Ontario)

A4. References *(cited in this guide)*

Anschuetz, B.L. "The High Cost of Caring: Coping with Workplace Stress" in Sharing: Epilepsy Ontario. (Posted 29 November 1999)

Bachmann, K., 2000. "More Than Just Hard Hats and Safety Boots: Creating Healthier Work Environments: Creating Healthier Work Environments". Canada: The Conference Board of Canada. (See the Conference Board of Canada Web site: http://www.conferenceboard.ca/Health/reports.htm

Blume, S.B. 1998. "Alcohol and Drug Abuse". In ILO Encyclopaedia of Occupational Health and Safety, 4th edition. Geneva: International Labour Office. Page 15.73.

Canadian Mental Health Association - National Office (no date cited). Home Page located at: http://www.cmha.ca/

Canadian Produce Marketing Association,1999. "About the Campaign" http://www.5to10aday.com/eng/about.htm

Dietitians of Canada, (site copyright 1997). Various documents from the "Eat Well, Live Well" web site at http://www.dietitians.ca/

Health Canada, 1999. "Health Works: A how-to for health and business success" http://www.hc-sc.gc.ca/hppb/ahi/workplace/pdf/guide.pdf

Health Canada, 2000. Handbook for Canada's Physical Activity Guide to Healthy Active Living. http://www.hc-sc.gc.ca/hppb/paguide/download.html

Health Canada, 2000. "Best Advice on Stress Risk Management in the Workplace" http://www.hc-sc.gc.ca/hppb/ahi/workplace/pdf/stress_risk_management_1.pdf

http://www.hc-sc.gc.ca/hppb/ahi/workplace/pdf/stress_risk_management_2.pdf

Health Canada: Office of Nutrition Policy and Promotion, 2001. "Vitality" http://www.hc-sc.gc.ca/hppb/nutrition/index.html

Health Canada, 1990. Workplace Health System: An Overview Creating A Healthy Workplace. http://www.hc-sc.gc.ca/hppb/ahi/workplace/pube/workplacehealth/ system2.htm

Health Care Health and Safety Association of Ontario, 2000. "A Step in the Right Direction: Wellness in the Workplace". Toronto: Health Care Health and Safety Association of Ontario.

Human Resources Development Canada (HRDC) "Work - Life Balance in Canadian Workplaces" web site: http://www.hrsdc.gc.ca/asp/gateway.asp?hr=en/lp/spila/wlb/01home.shtml&hs=wnc

Lampton Health Unit, (as viewed on 2001-11-26) http://www.lambtonhealth.on.ca/nutrition/readlabels.asp

Murphy, L. R., 1995. Occupational Stress Management: Current Status and Future Direction. In Trends in Organizational Behavior. Volume 2., pp1-14

National Quality Institute, 1998. "Canadian Healthy Workplace Criteria". Canada: National Quality Institute and Health Canada or download from web at: http://www.nqi.ca/ english/store-chwc.htm

Public Works and Government Services Canada, 1990. "Action Towards Healthy Eating...Canada's Guidelines for Healthy Eating and Recommended Strategies for Implementation: The Report of the Communications/ Implementation Committee" http://www.hc-sc.gc.ca/hppb/ nutrition/pube/eat/index.html

Treasury Board of Canada Secretariat, 2001. "Policy on the Prevention and Resolution of Harassment in the Workplace" http://www.tbs-sct.gc.ca/pubs_pol/hrpubs/hw-hmt/hara_e.html

Rudnick, J., 1998 "Smoking Control in the Workplace". In ILO Encyclopaedia of Occupational Health and Safety, 4th ed. Geneva: International Labour Office. Page 15.37

U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (no date cited) "Making Your Workplace Smokefree: A Decision Maker's Guide" http://www.cdc.gov/tobacco/research_data/environmental/etsguide.htm

Workplace Safety and Insurance Board (WSIB) of Ontario, 1999. "Basic Certification Training Program: Participant's Manual". Toronto: Workplace Safety and Insurance Board.

Other Resources – In Print

Canadian Centre of Occupational Health and Safety (CCOHS). Various publications including: "Health and Safety Committee Reference Guide", "Office Ergonomics", "Violence in the Workplace Prevention Guide", etc.

Eakin, J.M. et al., 2001. "From Theory to Practice: A Determinants Approach to Workplace Health Promotion in Small Business" In Health Promotion Practice Volume 2, Number 2, 172-181.

Eakin, J., 1999. "Public Health and Workplace Health Promotion" In Public Health and Epidemiology Report Ontario. Volume 10, Number 5

European Agency for Safety and Health at Work, 2001. "Health and Safety Campaigning" Luxemburg: Office for Official Publications of the European Communities.

Heart and Stroke Foundation, 1997. "Coping with Stress" Toronto: Canadian Mental health Association and the Heart and Stroke Foundation.

Hunnicutt, D. et al., 2000. "Health Promotion: Sourcebook for Canadian Business". Hamilton: Wellness Councils of Canada.

Shain, M. et al., 2001. "Investing in Comprehensive Workplace Health Promotion" Toronto: Centre for Addiction and Mental Health and National Quality Institute.

Verhaeghe, C., 1999. "Working Health into the Workplace". In the Journal of the Ontario Occupational Health Nurses Association. Autumn 1999. Pages 21-23.

Other Resources – Web Based

"5 to 10 A Day - Are you getting enough?" http://www.5to10aday.com/

Best Start. 2001. "Workplace Health (various documents). Barrie, Ontario. http://www.beststart.org/resources/englishresources.html

Bro Taf Health Authority. 2001. "Promoting Health in Small Workplaces – a good practice guide". Wales. http://www.hpw.wales.gov.uk/English/resources/leafletsanddposters/small_workplaces_e.pdf

Canadian Centre for Occupational Health and Safety (CCOHS) http://www.ccohs.ca

Canadian Health Network http://canadian-health-network.ca

Communication Workers Union. 2001. "Stress Survey". London: LRD Publications. http://213.120.226.103/about/health_safety/stress.pdf or http://www.cwu.org

From Health Canada

Active Living at Work http://www.activelivingatwork.com/

Adult Health http://www.hc-sc.gc.ca/hppb/ahi/index.html

Office of Nutrition Policy and Promotion http://www.hc-sc.gc.ca/hppb/nutrition/index.html

Smoking Cessation: Living Smoke Free http://www.hc-sc.gc.ca/hppb/cessation/index.html

Workplace Health http://www.hc-sc.gc.ca/hppb/ahi/workplace/index.html

Health Education Board for Scotland. 2001. "The Health Promoting Health Service: A Framework for Good Practice". Scotland. http://www.hebs.com/hphs/pdf/hphs.pdf

Poon, P.L., et al. 2000. Workplace Active Living in Alberta: A Needs Assessment Report. Alberta Centre for Active Living. http://www.centre4activeliving.ca/Research/Reports/2000workneeds.htm

Notes

Notes

Notes

Notes

Other Products *electronic* by CCOHS

A 30-Day FREE Trial is available for any CD-ROM product

A collection of chemical information including:

MSDS* and **FTSS*** *(160,000 Material Safety Data Sheets)*
CHEMpendium™*
RTECS**
IPCS INCHEM*
IPCS INTOX*

References to oh&s books, journals, articles and reports

OSH References
OSHLINE with NIOSHTIC**
OSH Researcher
TOXLINE*

Regulatory Information

Canadian *enviro*OSH Legislation* Complete text, including graphics, of health, safety and environmental acts and regulations from all jurisdictions. Available as a national or regional collection including – National, Ontario, Eastern Canada, or Western Canada.

Canadian *enviro*OSH Legislation PLUS Standards* National collection of Canadian environmental, H&S Legislation *plus* the complete text of standards referenced in the legislation.

HRDC Labour Branch A collection of publications and databases from the federal jurisdiction

**also available on the Web*

Publications in this series

Groundskeepers Safety Guide for groundskeepers, landscape contractors and nursery workers

Cold Weather Workers Safety Guide addresses the health and safety information needs of the outdoor worker

School Workers Health and Safety Guide for teachers, custodians, school administrators and school board officials

Office Ergonomics Safety Guide helps office workers to recognize ergonomic hazards and take remedial action

Food Service Workers Safety Guide covering all safety aspects of the food preparation and service industries

Warehouse Workers Safety Guide for workers in warehouses, storage facilities, bulk stores and the transport industry

Indoor Air Quality Health and Safety Guide addresses concerns about indoor air quality, and explains everything building occupants need to know about ensuring their health and comfort

Violence in the Workplace Prevention Guide an essential resource for anyone who wants to learn about workplace violence and its prevention

Welders Health and Safety Guide helps workers recognize hazards associated with welding work and to prevent injury and illness

Health and Safety Committees Reference Guide provides practical guidance for the formation and effective functioning of health and safety committees

Noise Control in Industry: A Basic Guide helps workers and employers recognize noise problems, take steps to control occupational noise exposure and develop a hearing conservation program

Wellness in the Workplace provides practical steps and program suggestions for workplace health and wellness programs. Create a wellness program or integrate one or more initiatives into your existing framework.

Health and Safety Guide for Libraries will help you recognize, evaluate and control workplace hazards in libraries and other information centres.

Emergency Response Planning Guide will assist in developing a comprehensive emergency response plan for any size of business.

Mould in the Workplace – A Basic Guide includes information about moulds that workers may encounter in the workplace and tips for preventing health problems associated with exposure to mould.

For more information about these titles

905-570-8094 or **1-800-668-4284**

Fax: 905-572-2206 E-mail: clientservices@ccohs.ca

Web Site: www.ccohs.ca

CCOHS...

Canada's national centre for occupational health and safety. We provide unbiased information, advice and training on how to prevent illness and injury in the workplace.

When you have a question about health or safety, remember to use these FREE services:

Confidential Inquiries Service

1-800-263-8466
905-572-4400
inquiries@ccohs.ca

OSH Answers Web Service

www.ccohs.ca/oshanswers

For more information about CCOHS products and services:

905-570-8094 or **1-800-668-4284**
Fax: 905-572-2206 E-mail: clientservices@ccohs.ca
Web Site: www.ccohs.ca

Canadian Centre for Occupational Health and Safety
135 Hunter Street East, Hamilton Ontario Canada L8N 1M5